MEDICAL REPORT

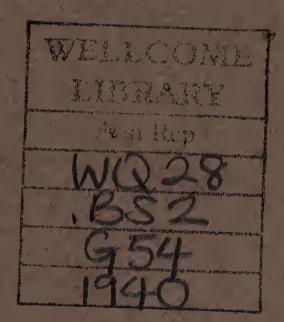
FOR THE YEAR

1940



THE GLASGOW ROYAL MATERNITY

AND WOMEN'S HOSPITAL





The Glasgow Royal Maternity and Women's Hospital

MEDICAL REPORT

For the Year 1940

Prepared by

M. M. GARREY, M.B., Ch.B., D.P.H.

GLASGOW:

AIRD & COGHILL, LTD., 24 DOUGLAS STREET, C.2

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MEDICAL STAFF

YEAR ENDING DECEMBER 1940.

Honorary Consulting Obstetric Physicians. A. N. M'LELLAN, M.B., C.M., L.M., F.R.C.O.G. J. M. MUNRO KERR, M.D., F.R.F.P.S.G., F.R.C.O.G.

> Honorary Consulting Physician. * J. SALISBURY CRAIG, M.D.

Honorary Consulting Surgeon. J. A. G. BURTON, M.C., M.B., F.R.F.P.S.G., F.R.C.S.E., D.P.H.

> Honorary Consulting Pathologist. J. SHAW DUNN, M.A., M.D., CH.B., M.SC.

Honorary Consulting Ophthalmic Surgeon. A. J. BALLANTYNE, M.D., F.R.F.P.S.G.

Honorary Consulting Ear, Nose and Throat Surgeon. G. B. BRAND, M.B., CH.B., F.R.F.P.S.G.

OBSTETRICAL STAFF. Chief Obstetric Surgeons.

Prof. S. J. CAMERON, M.B., CH.B., F.R.F.P.S.G., F.R.C.O.G. Prof. J. HENDRY, M.A., B.SC., M.B., CH.B., F.R.F.P.S.G., F.R.C.O.G. * R. A. LENNIE, T.D., M.D., F.R.F.P.S.G., F.R.C.O.G.

Visiting Obstetric Surgeons.

- D. F. ANDERSON, M.D., CH.B., F.R.F.P.S.G., F.R.C.O.G. A. BARR, M.B., CH.B., F.R.F.P.S.G., L.M., F.R.C.O.G. J. HEWITT, M.B., CH.B., F.R.C.O.G. A. N. M'LELLAN, M.B., C.M., L.M., F.R.C.O.G.

Assistant Obstetric Surgeons.

- * W. C. ARMSTRONG, M.B., CH.B., F.R.F.P.S.G., F.R.C.O.G. W. CLEMENT, M.B., CH.B., M.R.C.O.G., F.R.F.P.S.G. D. M. HART, M.B., CH.B., F.R.F.P.S.G., M.R.C.O.G.

 - A. M. HUNTER, M.B., CH.B., M.R.C.O.G.

 - A. MACARTNEY, M.B., CH.B.
 H. R. M'LENNAN, M.D., CH.B., M.R.C.O.G.
 E. D. MORTON, M.B., CH.B., M.R.C.O.G.
- * H. STIRLING, M.B., CH.B., M.R.C.O.G.

Extra Assistant Obstetric Surgeons.

- * R. MURDOCH, M.B., CH.B., M.R.C.O.G. A. SUTHERLAND, M.B., CH.B., M.R.C.O.G. R. J. WOTHERSPOON, M.B., CH.B., M.R.C.O.G.

Visiting Anæsthetist—R. G. GRIEVE, M.B., CH.B.

Resident Anæsthetist—E. B. COWAN, M.B., CH.B., D.A.

Senior Resident Obstetric Officer—*R. A. TENNENT, M.B., CH.B., M.R.C.O.G. M. M. GARREY, M.B., CH.B., D.P.H. (Acting).

Honorary Physician for Infant Ailments—S. GRAHAM, M.D., M.C.P.S. (ONT.), F.R.F.P.S.G. Assistant to Honorary Physician for Infant Ailments—F. J. FORD, M.D., F.R.F.P.S.G. Director of Research—*H. L. SHEEHAN, D.SC., M.D. A. M. STEWART, M.B., CH.B. (Acting).

Radiologist—G. J. WILSON, M.B., CH.B., D.P.H.

HOUSE SURGEONS DURING THE YEAR 1940.

- *Dr. EDWARD M. BARBOUR. | Dr. MARY M. BARRON.
- Dr. Marrion A. M. Brown.
 *Dr. David C. Caldwell.
 *Dr. John Crawford.
 *Dr. Robert M. Cross.

- Dr. Barbara Shepherd Dawson.
 Dr. James P. O. Erskine.
 *Dr. Henry Fairlie.
 Dr. Marjory A. Garrey.
 Dr. Agnes M. Highet.

 *Dr. David A. Thomso

- - * On War Service.

- Dr. A. NANCY MILLER. Dr. MARION H. NICOLSON.
- Dr. Hellen L. Reith.
 *Dr. David A. Thomson.
 *Dr. James Walker.

ABBREVIATIONS.

A.C.	-	-	-	-	After coming.
Adh. pl	ac.	-	- ,	-	Adherent placenta.
A.R.M.	-	-	-	-	Artificial rupture membranes.
Br.	-	-	-	-	Breech.
Conc. a	ec. ha	em.	-	-	Concealed accidental hæmorrhage.
D.C.	-	-	-	-	Diagonal conjugate.
Ext. acc	e. hæ	m.	-	-	External accidental hæmorrhage.
F.F.O.	-	-	-	-	Failed forceps outside.
H.B.P.	-	-	'-	-	High blood pressure.
L.O.P.	-	-	-	-	Left occipito-posterior.
L.U.S.	-	-	-	-	Lower uterine segment.
Med. in	d.	-	-	-	Medical induction.
P	-	-	-	-	Pyrexia.
P.P.	-	-	-	-	Post-partum.
P.P.H.	-	-	-	-	Post-partum hæmorrhage.
P.J.R.	-	-	-	-	Promontory just reached.
P.U.O.	-	-	-	-	Pyrexia of unknown origin.
Plac. pr	ævia	-	-	-	Placenta prævia.
R.O.P.	-	-	-	-	Right occipito-posterior.
R.P.	-	-	-	-	Retroplacental.
S	-	-	-	-	Sepsis.
Surg. in	ıd.	-	-	-	Surgical induction.
V	-	-	-	-	Vertex.

FOREWORD.

THE Fifteenth Annual Medical Report of the Glasgow Royal Maternity and Women's Hospital has been arranged in much the same way as in the previous year. The standard scheme of the Committee appointed by the Royal Society of Medicine has been followed as far as possible. The Medical Committee of the Hospital decided to issue the Report in its usual form this year as a condensed report is largely valueless.

The Hospital has 175 beds—78 for ante-natal patients, 78 for lying-in patients, and 19 for "suspect" cases. The hospital is divided into three permanent units, each consisting of ante-natal wards, labour ward and lying-in wards. Septic cases are transferred to the Isolation Hospitals of the Local Authority by arrangement with the Medical Officer of Health.

Each permanent unit has the services of two House Surgeons, one for duties in the Hospital and the other for duties in connection with the work of the outdoor service of the Hospital. The House Surgeons are appointed for six months, the first three months being devoted to indoor duties and the second to outdoor.

As in previous years the Hospital has had the services of a Resident Anæsthetist and a Visiting Anæsthetist through the generosity of the trustees of Mr. Peter Coats.

The statistics for the year 1940 were as follows:—

Number of patients admitted,	4,354
Average daily number in wards,	152
Average residence in wards (days)	12.8
Largest number of patients resident in one day,	182
Smallest number of patients resident in one day,	125
Number of infants born in Hospital,	3,101
Number of infants born alive,	2,745
Number of infants still-born,	356
Maternal deaths (death rate 1.5 per cent.),	65
Maternal death rate per 1,000 live births, -	23.8
Overflow patients accepted by Municipal Hospitals,	301

An Ante-natal Dispensary is attached to the Hospital at which, in the past year, there were 15,952 attendances, and an Infant Consultation Dispensary is run in conjunction at which there were 3,088 attendances.

Ante-natal cases are admitted to the Hospital from doctors in the city area, from Local Authority Clinics, from the Hospital Ante-natal Dispensary and from certain outlying areas where there is no provision for hospital treatment.

Emergency cases are admitted to the Hospital from doctors in the city area and in outlying districts where there are no hospital facilities, and also from the Hospital outdoor service.

In all, 670 patients (15.4 per cent. of total admissions) were admitted from outwith the city.

During 1940 the Hospital outdoor service attended 4,174 women in their own homes. Further data is as follows:—

Total visits paid, -		-	-	- 42,783
Abnormal cases (3.7 per	cent.), -	-	-	- 155
Infants born,		es.	-	- 4,138
Infants born alive (97.7	per cent.)	, -	-	- 4,044
Maternal deaths,		_	-	- 6

As in previous years the indoor cases have been divided into two categories for the purposes of this report:—

Category A.

Patients who had been under ante-natal supervision at the Hospital Clinic and who had attended on at least two occasions shortly before admission.

Category B.

All other patients.

The number of cases in each category was as follows:—Category A:

Attending Hospital Clinic (42·1 per cent.), - 1,833 Category B:

Others (57.9 per cent.), - - - - 2,521

Total, - - - - 4,354

The total number of abnormal cases (including 1,753 ante-natal cases) was 3,367, i.e., 77·3 per cent. of all admissions. Such a large number of abnormal cases is explained by the fact that the Hospital serves a large industrial population where the incidence of rickets and malnutrition is high, and some of the outlying areas send in abnormal cases only.

The special clinic for specific diseases in out-patients has been temporarily discontinued since September, 1939, and the affected patients are now treated at a Corporation Clinic.

Since 1935 a blood transfusion service has been maintained by the Hospital. The number of donors on the roll at present is 173.

Pathological, bacteriological and bio-chemical investigations are carried out in the Research Department, which is under the control of the Director of Research. At present work remains rather restricted as a result of the war. Dr. Crawford has continued her work on the chemical changes in the blood in the toxemias of pregnancy and in obstetric shock. Dr. Stewart is studying the vascular supply of the anterior lobe of the pituitary with reference to the etiology of postpartum necrosis. Dr. Sutherland is now beginning the investigation of heart disease in pregnancy on clinico-pathological lines, the study with Dr. Sheehan of the morbid anatomy of this condition being now completed. Dr. Walker commenced a study of Wernicke's encephalopathy in hyperemesis, but this work was interrupted by his mobilisation.

The five papers which have been published in the last year from the Department appeared in the "British Journal of Obstetrics and Gynæcology" and the "Lancet."

The number of medical students enrolled during the year for training in practical midwifery was 293, and 144 nurses were enrolled for training for the Certificate of the Central Midwives' Board. There were 4 post-graduate students during the year.

A list of abbreviations used in the Report will be found on page 4.

The medical staff have not been grouped in units as there have been many changes and rearrangements owing to the mobilisation of the members.

SUMMARY OF TOTAL CASES ADMITTED.

Category A.—Cases which had been under Ante-natal Supervision at Hospital Clinic.

1.	Delivered in hospi	tal,	-	-	-	-	-	•	-	1,434
2.	Died undelivered,	-	-	-	-	-	-	-	-	2
3.	Abortions, -	-	-	-	-	•	-	-	-	60
4.	Ectopic gestation,	-	-	-	-	-	-	•	-	
5.	Miscellaneous, -		-	-	-	-	•	~	-	337
	•				\mathbf{T}	otal,	-	-	٠	1,833
		Ca	ıtegory	y B	-Other	rs.				
1.	Delivered in hospi	tal,	-	-	-	•	-		-	1,598
2.	Died undelivered,	-		-			-	•	-	14
3.	Abortions, -	-	-	-	81	-	-	•		369
4.	Ectopic gestation,	•	-	-	*	-	-	444	-	1
5.	Miscellaneous, -	-	-	-	, •	~ / m	-	-	-	539
					Tc	otal,			-	${2,521}$

Categories A and B.

The following table shows abnormalities found in cases admitted during the year:—

		Abno	rmali	ty.					No. of Cases.
Abscess, alveola	.ı	•		•	•	-	•		2
Bartho	olin's	-	_	-	-	_	-		3
buttoe	k -	-	-	-	-	-	-		1
multip		-	_	-	-	-	-		1
thigh	-	_	-	-	-	-	-		1
Appendicitis	-	-	-	-	_	-	-	_	3
Asthma -	-	-	-	-	-	-	-		2
Bazin's disease	_	- '	-	-	-	-	-		1
Bronchiectasis	-	-	-	_	-	-	-		1
Bronchitis -	-	-	-	-	-	-	-		11
Carcinoma of 1	iver	-	-	-	-	_	-		1
1	vagina	-	-	-	-	-	-		1
Cervical polypu	ıs -	-	-	-	_	-	-		1
Cholecystitis	-	-	-	-	-	-	-		2
Chorea -	-	-	-	-	-	-	-	ĺ	8
Condylomata si	implex	-	-	-	-	-	-		1
Dysentery, Flex	xner	-	-	-	-	-	-		8
Son	ine	-	-	-	-	-	-		1
Dermoid cyst	-	-	-	-	-	-	-		1
Diabetes -	- .	-	-	-	-	-	-		7
Disseminated s	clerosis	;	-	-	-	-	-	1	2
Epilepsy -	-	-	-	-	-	-	-		l 1
Exophthalmic	goitre	-	-	-	-	-	-		1
Fibroids -	-		-	-	-	-	-		10
Fœtal states, a				-	-	-	-		17
	exompl			-	•	-	-		3
	hydroc			1		1.01	-		$\frac{15}{c}$
	hydroc				pina	риппа	-		6
	multipl			ities	-	-	-		$\frac{2}{5}$
	spina b	паа	-	-	-	-	-		
Fragillitas ossiu	um c 1-1-1	-	-	-	-	-	-		1
Furunculosis of		m	-	-	-	-	-		$\frac{1}{1}$
German measle	es -	-	-	-	-	-	-		$\overset{1}{2}$
Glycosuria -	_	-	-	-	-	-	-		1
Goitre (simple)	' -	-	-	-	-	•	-		$\frac{1}{2}$
Gonorrhea -	-	-	-	-	-	-	-		7
Hæmaturia -	-	-	-	•	-	-	-		33
Hydramnios	•	•	-	•	-	•	-		1
Hydrothorax Influenza -	-	-	-	-	-	-	-		1

Abno	rmalit;	у.				No. of Cases.
Insanity, puerperal -					_	2
Intestinal obstruction -	_	_	_	_	_ 1	ĩ
Mastitis (ante-natal) -	_	_		_	_	4
Nephritis, chronic -	-	_	_	_		$\hat{ar{5}}$
Ovarian cvst	-	-	-	_	_	ì
Ovarian cyst Ovarian fibroid	_	-	-	_	-	ì
Phlebitis	-	_	_	-	-	6
Phlegmasia alba dolens	-	-	-	-	-	5
Perineal sinus	-	-	-	-	-	1
Pilo-nidal eyst	-	-	-	-	-	1
Pleurisy	-	-	-	-	-	1
Pneumonia, lobar -	-	-	-	-	-	1
broncho -	-	-	-	-	-	1
influenzal	-	-	-	-	-	2
Pott's fracture	-	-	-	-	-	1
Prolapsed cord	-	-	-	-	-	42
Ptyalism	-	-	-	-	· -	3.
Renal calculus	-	-	-	-	-	1
Scabies	•	-	-	-	-	6
Syphilis	-	-	-	-	-	10
Transposition of viscera	-	-	-	-	-	1
Tuberculosis, miliary -	-	-	-	-	-	1
pulmonary	-	-	-	-	-	12
renal -	•	-	-	•	-	1
Vaginal septum		-	•	-	-	$\frac{2}{1}$
Vesico-vaginal fistula -			-	-	-	1
Wernicke's encephalopath			-	-	-	$\frac{1}{2}$
Yellow atrophy, acute of	ostetr	nc -	-	-	-	2

OBSTETRICAL CASES.

ABNORMAL DELIVERY.

1. Vertex. Occipito-Posterior.

There were 107 cases in which there was an occipito-posterior position of the vertex. One case (see No. 521 under deaths) died of pneumonia and pneumococcal meningitis and the other case in which there was slight hydramnios (see No. 1605 under deaths) died of obstetric shock. The mortality rate was thus 1.9 per cent. There were 5 cases of twins. In 4 cases the first twin presented in the occipito-posterior position and required delivery by manual rotation and forceps. In one case both twins were in the occipito-posterior position and were delivered by forceps. Of 108 infants born, 96 were born alive, but of these 5 died later. There were 12 still-births. Prolapse of the cord was noted in one case. In 3 cases an unsuccessful attempt to deliver by the forceps had been made outside and 2 of these cases required destructive operations on the child. Hypertensive toxæmia was noted in 4 cases. Puerperal sepsis was noted in 3 cases and puerperal pyrexia in 6 cases, which gives a combined pyrexia and sepsis rate of 8.4 per cent.

Among the total 107 cases there were 19 cases of contracted pelvis. Unsuccessful attempt at delivery had been made in 5 cases. Surgical induction by artificial rupture of the membranes was performed in 4 cases.

MALPRESENTATIONS.

1. Vertex. Occipito-Posterior.

Tables showing mode of delivery and results:-

Category A.

Mode of Delivery.	Mot	her.		Child		Left.	Right.	exia.	Sepsis.
mode of Bonvoly.	Α.	D.	A .	S.B.	D.	T	Rig	Pyrexia	Sep
Manual rotation, forceps Forceps, face to pubis S p o n t a n e o u s long rotation,	35 1	1 —	35*	$\begin{bmatrix} 2 \\ 1 \end{bmatrix}$	<u> </u>	9	28		
spontaneous	5		5				5		
Totals	· 41	1	40	3	_	10	33		-

^{*} Twins (once).

Category B.

Manual rotation, forceps Forceps, face to pubis Spontaneous, face to pubis - Spontaneous Perforation and traction	54 1 3 4 2	<u>-</u>	44 1 2 4	$-\frac{6}{1}$	5 —	$\begin{array}{c c} 10 \\ \hline 1 \\ \hline \\ - \\ \end{array}$	$\begin{array}{c} 45 \\ 1 \\ 2 \\ 3 \\ 2 \\ \end{array}$	<u>6</u>	2
Totals	64	1	51	9	5	12	53	6	2

Tables showing relation of mode of delivery to weight of child and duration of labour:—

Category A.

	Un	der 7 11	bs.	7	7 - 8 lbs	•	Over 8 lbs.			
Mode of Delivery.	Under 12 hours.	12-24	Over 24 hours.	Under 12 hours	12-24		Under 12 hours.	12-24	Over 24 hours.	
Manual rotation, forceps Forceps, face to pubis -	1	2	14	3 —	3	6			8	
Spontaneous long rotation, spontaneous	1	-	1	1	1		1	_		
Totals	2	2	15	4	4	7	1	_	8	

Category B.

Manual rotation, forceps Forceps, face to pubis - S p o n t a n e o u s long rotation, spontaneous Perforation and traction	4 1 —	<u>-</u>	6 1	4 1 —	9 1 1	19 1 1 1	_ _ _ _	4	<u>8</u>
Totals	5	1	7	5	11	22	1	4	8

2. Breech.

There were 356 cases of breech presentation, 114 of which had been under ante-natal supervision at the hospital clinic. There were 180 in primiparæ and 176 in multiparæ. There were 6 maternal deaths (see Nos. 206, 2691, 3018, 3379, 3499 and 4276). Two cases died of obstetric shock and one case of obstetric shock and mixed accidental hæmorrhage. One case died under anæsthesia, one case died from post-partum hæmorrhage and one case died of obstetric shock following laparotomy and manual delivery.

There were 27 cases of twins and of these both children presented as breech in 5 cases.

There were 58 still-births, 30 in primiparæ and 28 in multiparæ. Four were hydrocephalic, 2 were anencephalic, 1 showed spina bifida alone and 2 showed exomphalos. In two cases the cord was prolapsed. In 3 cases the mother suffered from hypertensive toxæmia, in 4 cases from accidental hæmorrhage and in one case from hydramnios. Craniotomy, because of contracted pelvis, was performed in one case.

Fourteen cases were delivered by cæsarean section. In eight cases the indication for operation was contracted pelvis and in one case disproportion; in two cases heart disease, in one case an elderly primipara and in two cases bad obstetric history.

	,sis	$_{ m GeF}$		c1			
	.six	Pyre		50		62	
/ B.		Died.	1 4 62 1	∞	times).	C1 70 L1	
Category	Child.	S.B.	1084 1 1	25	Twins (3	22	
		Alive.		73	*	81 10 8 10 8 10 8 10 8 10 8 10 8 10 8 1	
aæ.	ner.	D.			vidæ.	1 1 2	
y A. (a) Frimigraviae.	Mother.	Α.	2048 - 21 81 - 81 81 4 1	125	Multigravid x	20 13 13 14 15 16 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	
	.sis	dəg			(b) Mul		
	Pyrexia.		- 1 1 1		2)		ns.
	Child.	Died.		4		24	* Twins
Category		S.B.	- e -	5		0	
Ö		Alive.	w_==	33		\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	her	D.		63			
	Mother	Ä	461200461 11 1	53		08 70 10 4 60 08 60 4 60	
	Mode of Dollwown	Mode of Defivery.	Spontaneous (uncomplicated) - Spontaneous (complicated) - Manual (uncomplicated) - Spontaneous version, undelivered External version, spontaneous - External version, forceps - Cæsarean section - Forceps to a.c. head - Forceps to a.c. head - External version, undelivered - External version, casarean section External version, cæsarean section External version, cæsarean section Failed version - Spontaneous version, cæs section	Totals		Spontaneous (uncomplicated) Spontaneous (complicated) Manual (uncomplicated) Cæsarean section Perforation of a.c. head Failed version, undelivered External version, spontaneous External version, forceps External version, forceps External version, cæsarean section External version, indelivered External version, craniotomy External version, craniotomy Casarean section Casarean Ca	

(a) Primigraviàæ.

3. FACE AND BROW.

There were 21 cases of face and brow presentation, 6 of these being in Category A and 15 in Category B. There were no maternal deaths. There were 9 still-births. In 2 of these cases destructive operations were performed. In 4 cases an encephaly was present and in 1 case severe hypertensive toxemia. There were 2 infantile deaths. There was 1 case of pyrexia and 2 of mild sepsis.

Categories A and B.

Mode of Delivery	Mode of Delivery.									Sepsis.
				A	D	A	S.B.	Died.	Pyrexia	S.
Spontaneous Correction to vertex, forceps Internal version to breech Craniotomy Cæsarean section (L.U.S.) Forceps	-	- - - -	- - - -	9 2 2 2 4		$\begin{vmatrix} 4 \\ -1 \\ 2 \\ 3 \end{vmatrix}$	4 2 1 2 —			
Totals	-	-	-	21		10	9	2	1	$\frac{1}{2}$

FACE AND BROW PRESENTATIONS.

A.—Cases under Ante-natal Supervision at Hospital Clinic.

Reg. No.	Age.	Parity.	a Maturity at E Delivery.	y Duration of Eabour.	Mode of Delivery.	sq Weight of Child.	M.	sult.	Pyrexia or Sepsis.	Remarks.
39	36	6	40	6	Forceps -	$\left[\begin{array}{c c}6\frac{3}{4}\end{array}\right]$	A	A		Brow. Second stage
758	32	2	40	30	Cæs. section	834	A	\mathbf{A}		delay. Brow. L.U.S. section.
924	28	3	41	19	Cæs. section	$8\frac{3}{4}$	A	A		Brow. L.U.S. section.
1051	26	2	40	8	Int. version	$ 8^{\frac{4}{1}}_{4} $	A	A	-	Attempted forcej:
					Man. breech	4		4.4	1	delivery.
2713	25	1	32	21	Spontaneous	$2\frac{3}{4}$	A	SB		Anencephalic.
2913	25	1	40	22	Spontaneous	$7\frac{1}{2}$	A	A		Face. Ext. acc.
					*	2				hæmorrhage. A.R.M. in labour.

B.—Others.

Reg.	Age.	Parity.	Maturity at Delivery.	Duration of Labour.	Mode of Delivery.	Weight of Child.	Res	sult.	Pyrexia or Sepsis.	Remarks.
			wks	hrs.		lbs.	М.	Ch.	Pyr	
186	27	3	36	10	Spontaneous	$3\frac{3}{4}$	A	SB		Face. Hydramnios. Conc. acc. hæm. Anencephaly.
947	29	1	39	42	Forceps -	$7\frac{1}{2}$	$\mid A \mid$	A		Face. Keelland's forceps.
988	$\frac{1}{23}$	3	37	3	Spontaneous	6	A	A		Face.
1270	38	7	40	37	Forceps -	9	A	SB		Brow. F.F.O. Conver-
										sion to vertex.
1337	21	1	40	10	Spontaneous	7	A	A		Face.
1348	19	1	40	48	Spontaneous	$6\frac{3}{4}$	A	A	_	Face. R.M.A.
1551	17	1	40	23	Forceps -	8	A	A		Face. L.M.A.
1612	24	2	40	39	Spontaneous	$8\frac{3}{4}$	A	D		Brow. Spontaneous
										vertex.
2067	32	1	40	120	Perf. and forceps	$7\frac{1}{2}$	A	SB	S	Face. Persistent R.M.P. C.P. D. $64\frac{1}{4}$ ins. Blood transfusion.
2096	19	2	40	23	Forceps -	$8\frac{1}{2}$	A	D	P	Face. L.M.P. Manual rotation.
2599	26	1	40	18	Craniotomy	9	A	SB	- :	Persistent R.M.P.
3181	27	1	40	24	Spontaneous	5	A	SB		Face. Anencephalic.
3284	32	1	32	15	Spontaneous	$2\frac{3}{4}$	A	SB		Face. Anencephaly.
3311	24	1	40	60	Forceps -	9	A	SB	S	Correction to vertex.
3 696	26	3	38	5	Spontaneous	71/4	A	SB		Face. Hyp. tox. Int. podalic version.
		,								

4. Shoulder Presentation.

There were 42 cases of shoulder presentation, 3 of which were not delivered. There was one maternal death (see No. 14 under deaths). Eighteen infants were still-born (45 per cent.). There were 2 infantile deaths. There was one case of pyrexia.

Shoulder Presentation.

Mode of Delivery.	No.	of C	ases.		Result ther li		Chile	l born	alive.	Pyrexia.	Sepsis.	Total notifiable.
Mode of a series	A	В	Total.	A	В	Total.	A	В	Total.	Py	Š	not
Internal version, manual breech -	2	15	17	2	15	17	1	7	8	2		2
Internal version to breech, spontaneous Craniotomy	$egin{array}{c} 2 \ 1 \end{array}$	4.	$\frac{6}{1}$	$egin{array}{c} 2 \ 1 \end{array}$	4	$\begin{bmatrix} 6 \\ 1 \end{bmatrix}$		2	2		_	
External version to vertex, spontaneous	$\frac{3}{2}$	6	9 3	$\frac{3}{2}$	6	9 3	3	6	9		_	
Undelivered Bipolar version, manual breech -		1	1	_	1	1		1	1			
Cæsarean hysterec- tomy Cæsarean section -		$\begin{vmatrix} 1 \\ 2 \end{vmatrix}$	$\frac{1}{2}$		$-\frac{1}{2}$	$\frac{1}{2}$	_	$-\frac{1}{2}$	$\frac{}{2}$			
Spontaneous version to vertex, spont.		2	2		2	2	_	2	2		_	
Decapitation and manual delivery -		2	2		2	2		_	_		·	
Bipolar version, spontaneous breech		1	1		1	1		_	-			
Totals	10	35	45	10	34	44	4	20	24	$\frac{1}{2}$	1	2

SHOULDER PRESENTATIONS.

A.—Cases under Ante-natal Supervision at Hospital Clinic.

,					7 21766-766666	$\sim a_P$		50010		nospual Cunic.
Reg. No.	Age.	Parity.	Maturity at Delivery.	The Duration of Eabour.	Mode of Delivery.	seq Weight of Child.	Re	sult.	Pyrexia or Sepsis.	Remarks.
133	31	4	40	21	Man. breech	7	A	SB		Int. version. Rupt. uterus. Subtotal hys-
612	26	2	,—		Undelivered		A	_		terectomy. Transverse lie. Spon-
1079			40	18	Craniotomy	$7\frac{1}{4}$	A	SB		taneous version Prol. cord. C.P. D.C.
1026	34	1	39	6	Spontaneous	$5\frac{1}{4}$	A	A	_	4½ ins. Hyp. toxæmia. Surg. ind. A.R.M. Twins. (1) Vertex. (2) Transverse. Correction and A.R.M. of second sac.
$\begin{array}{c} 1156 \\ 1560 \end{array}$	$\begin{array}{c} 26 \\ 36 \end{array}$	$\frac{2}{1}$	39	33	Undelivered Spontaneous	$\frac{-}{5\frac{1}{4}}$	A A	A	_	Ext. version. Surg. ind.
2614	26	3	40		Vertex Spontaneous	$7\frac{3}{4}$	A	SB		A.R.M. Prol. cord and hand.
$\frac{2803}{3062}$	27 31	$\frac{3}{1}$	$\frac{}{35}$	$\left \frac{}{24} \right $	breech Undelivered Spontaneous	$\frac{1}{3\frac{1}{2}}$	A A	$\frac{1}{\text{SB}}$		Int. version. Ext. version to vertex. Hyp. tox. Int. version.
3140	29	4	39	15	breech Man. breech	$egin{array}{c} egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}$	A	A		Macerated feetus. Hyp. tox. Hydramnios.
3957	29	2	36	12	Spontaneous	$3\frac{1}{2}$	A	D		Twins. (1) Shoulder. Int. version. (2) Vertex. Spontaneous. Hyp. tox. Twins. (1) Vertex, forceps. (2) Transverse. Ext. version to vertex. A.R.M. in labour.
					В.—	-Othe	ers.			
$\frac{1}{14}$	40 39	7 7	40 40	12 12	Man. breech Cæsarean hysterectomy	7	A D	D SB		Bipolar version. Impacted transverse. Rupt. uterus. Right salpingo oophorectomy. Two blood transfusions.
55	22	2	40	64	Man. breech	9	A	A	P	Prol. cord. Int. version. P.U.O.
$\begin{cases} 154 \\ 199 \end{cases}$	36	2	40	$\frac{-}{8}$	Undelivered Man. breech	$\frac{}{7\frac{1}{2}}$	$\begin{bmatrix} \mathbf{A} \\ \mathbf{A} \end{bmatrix}$	$\overline{\mathbf{A}}$		Transverse. Ext. version. Int. version.
240	31	3	40	5	Spontaneous vertex	6	Ā	A	-	Ext. version.
382 433	28 35	4 2	40	17	Undelivered Spontaneous breech	6	AA	A SB	_	Transverse lie. Hyp. tox. Surg. ind. A.R.M. Prol. cord and arm. Int. version. Macerated fœtus.
479	31	3	37	17	Spontaneous version	$\left. 5rac{1}{2} \right $	A	A	}	Ext. acc. hæm. Ext. version.

Reg. No.	Age.	Parity.	A Maturity at Z Delivery.	rd Duration of	Mode of Delivery.	Segment of Child.	Res	Ch.	Pyrexia or Sepsis.	Remarks.
$ \begin{cases} 642 \\ 1757 \\ 714 \end{cases} $	$\frac{41}{33}$	$\frac{9}{6}$	$\frac{-}{40}$	$\begin{bmatrix} -6 \\ 5 \end{bmatrix}$	Undelivered Man. breech Man. breech	$\begin{bmatrix} -7 \\ 6\frac{3}{4} \end{bmatrix}$	$\frac{}{A}$	$\begin{bmatrix} - \\ A \\ SB \end{bmatrix}$	=	Myocarditis. Prol. cord. Int. version. Twins. (1) B.B.O. (2) Prol. cord. Int. version.
745 778	$\frac{42}{37}$	8 10	37 40	<u>-</u> 5	Cæs. section Man. breech	5 8	A A	A A	<u>-</u>	Cent. plac. prævia. Twins (1) Breech. (2) Int. version.
878 898	$\begin{array}{c} 35 \\ 25 \end{array}$	7 3	40 40	15 7	Man. breech Spontaneous	10 7	A A	SB A	_	Prol. arm. Int. version. Int. version.
905 966	32 28	6 3	39 32	14 13	breech Man. breech Man. breech	$\begin{array}{c} 6 \\ 5\frac{1}{2} \end{array}$	A A	A SB	_	Prol. cord. Int. version. Plac. prævia. Int. version.
$\begin{cases} 1017 \\ 1496 \end{cases}$		$\frac{2}{2}$	$\frac{1}{40}$	11	Undelivered Spontaneous	$\begin{array}{ c c c }\hline -& & \\ \hline 6\frac{1}{2} & & \\ \hline 7\frac{1}{4} & & & \\ \end{array}$	A	$\frac{1}{A}$	_	Spontaneous version. Ext. version. Surg. ind.
1035 1211	38 24	8	40 38	3 37	Spontaneous vertex Man. breech	6	A A	A SB	P	A.R.M. Int. version. P.U.O.
1472 1837	$\begin{array}{c c} 25 \\ 26 \end{array}$	$\begin{vmatrix} 2 \\ 2 \end{vmatrix}$	36	15	Spontaneous vertex Man. breech	$5\frac{1}{2}$ $5\frac{1}{4}$	$egin{array}{c} A \\ A \end{array}$	A		Ext. version. Surg. ind. A.R.M. Prol. arm. Int. version.
1956	44	12	39	_	Class. cæs. section	$7\frac{1}{2}$	A	A SB		Plac. prævia. Prol. cord.
2274	31	3	40	46	Decapitation and manual	6	A			
2440	20	2	36	11	Spontaneous breech	7	A	SB	-	Ext. acc. hæm. Bipolar version.
2810	32	4	39	13	Spontaneous vertex.	$6\frac{1}{2}$	A	A	-	Ext. version. Surg. ind. A.R.M.
2766	30	4	40	12	Man. breech	8	A	SB	-	C.P. D.C. $4\frac{1}{4}$ ins. Prol. hand. Int. version. Perf. a.c. head.
2815	31	6	40	24	Manual -	12	A	SB	P	C.P. D.C. $4\frac{1}{4}$ ins. Prol. cord. Int. version. P.U.O.
2879	38	2	40	20	Spontaneous	7	A	A		Spontaneous version to vertex. A.R.M. in labour.
2963	34	10	40	14	Man. breech	$6\frac{1}{4}$	A	SB		Twins (1) Vertex B.B.O. (2) Transverse. Int. version.
2995	25	2	39	8	Man. breech	$5\frac{3}{4}$	A	A		Hyp. toxæmia. Int. version. Lat. plac. prævia.
3270	39	11	40	21	Decapitation and manual	6	A	SB		
f 329					Undelivered	63	A	$\frac{1}{A}$	-	Ext. version to vertex.
$\begin{array}{c} 334 \\ 3314 \end{array}$		8			Spontaneous Spontaneous	$\frac{6\frac{3}{4}}{7\frac{1}{2}}$	A	A	_	Prol. arm. Int. version.
4137	30	3	38	9	breech Man. breech	$8\frac{1}{2}$	A	SB	-	C.P. D.C. $4\frac{1}{4}$ ins. Prol. cord. Int. version.
4267	35	9	36	72	Spontaneous breech	5	A	SB		Int. version. Macerated feetus.

5. Compound Presentations.

There were 15 cases of compound presentation. There were no maternal deaths. Four infants were still-born (26.7 per cent.). There was one infantile death and one case of mild sepsis.

A.—Cases under Ante-natal Supervision at Hospital Clinic.

Reg.	Age.	Parity.	a Maturity at sa Delivery.	g Duration of	Mode of Delivery.	sql Weight of Child.	Res	sult Ch.	Pyrexia or Sepsis.	Remarks.
1435 3795	24 20	$\begin{array}{c} 2 \\ 1 \end{array}$	40 38	50 53	Spontaneous Forceps -	$7\frac{1}{4}$ $6\frac{3}{4}$	AAA	AA		Vertex and hand. Vertex and arm. Arm replaced.

B.—Others.

C 710	9.5	_			TI. J. Hansan		A .			A
∫ 719	32	5	0.7	_	Undelivered	<u> </u>	A	Α		Anæmia.
2006			37	8	Man. breech	$\frac{6\frac{3}{4}}{6}$	A	A	—	Breech, hand and cord.
221	37	8	40	16	Forceps -	8	A	SB		C.P. D.C. $4\frac{1}{4}$ ins. Vertex,
										hand, prol. cord. Hand replaced.
353	20	1	40	42	Forceps -	7	\mathbf{A}	\mathbf{A}		Vertex and hand. Hand
999	40	1	-£0	***	rorceps -	'	Δ	Δ		replaced. R.O.P.
564	31	$\frac{1}{2}$	40	19	Forcens	$7\frac{1}{4}$	\mathbf{A}	A		Manual rotation. Vertex
904	91	4	40	19	Forceps -	4	\boldsymbol{A}	A		
					·					and hand. Hand re-
7.000	0 =		4.0		T	~	A	A		placed.
1050	37	6	40	2	Forceps -	5	\mathbf{A}	A		Vertex and arm. Arm
										replaced. R.O.P.
					~~~			~~		Manual rotation.
1234	23	2	34	13	Willet's	$5\frac{1}{4}$	A	SB		Prol. hand and cord.
					forceps					Hand replaced.
2070	33	4	34	5	Man. breech	$4\frac{1}{2}$	A	$\mathbf{D}$		Vertex and legs.
2764	23	3	40	23	Spontaneous	$egin{array}{c} 7rac{ ilde{1}}{2} \ 7rac{ ilde{1}}{2} \end{array}$	A	A	—	Vertex and hand.
2808	39	2	40	12	Forceps -	75	A	A		Hyp. tox. Vertex and
					_	-				hand. Hand replaced.
2898	20	1	40	15	Forceps -	$7\frac{1}{2}$	A	A		Vertex and arm. Arm
					1	_				replaced.
∫3381	18	1					A			Breech. Ext. version.
3548	1		38	62	Forceps -	$6\frac{1}{2}$	A	SB	$\mid s \mid$	Mild sepsis. Vertex and
(0010					Loropa			,0.12		hand. Hand replaced.
4211	25	3	40	22	Perf. and	4	A	SB	-	Vertex and hand. Hydro-
					traction					cephalic.
4233	35	4	40	16	Man. breech	$8\frac{3}{4}$	A	A		Hand, foot and vertex.
				8						Int. version. Forceps
										to a.c. head.
								A1		

#### MULTIPLE PREGNANCY.

#### 1. Twins.

There were 75 cases of twin pregnancy during the year—30 cases were primiparæ and 45 multiparæ. One of these cases was undelivered and there were 5 cases with the first child born outside. 4 maternal deaths. One case died of obstetric shock following delivery, one case died of myocarditis and mitral stenosis following delivery, one case of hypertensive toxæmia died of lobar pneumonia and one case of late vomiting died of toxemia following cesarean section (see Nos. 888, 2113, 2884 and 4238 under deaths). One hundred and twenty-two infants (88.4 per cent.) were born alive and 16 were still-born (11.6 per cent.); 39 of the infants born alive died later. The cause of death was prematurity in 22 cases, cerebral hæmorrhage in 5 cases, prematurity and pneumonia in 3 cases, atelectasis in 3 cases, cleft palate and pneumonia in 2 cases, hæmorrhagic disease of the new-born in 1 case, tentorial tear in 1 case, spina bifida and cerebral hæmorrhage in 1 case and multiple deformities and cerebral hæmorrhage in 1 case.

Pregnancy was complicated by toxemia in 31 cases, hydramnios in 3 cases, contracted pelvis in 1 case, pyelitis in 1 case, eclampsia in 2 cases, late vomiting in 1 case, placenta prævia in 1 case, mixed accidental hæmorrhage in 1 case and external accidental hæmorrhage in 2 cases.

Tables have been drawn up to show the results, presentation, relative infantile weights and modes of delivery.

Table 1—Results.

		Mot	Mother, Child 1.						Ch	Pyrexia.	is.		
		Α.	D.	Α.	S.B.	D.	Total.	Α.	S.B.	D.	Total.	Pyre	Sepsis.
Category A	-	26	3	19	2	8	29	20	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	7	29	1	
Category B	_	39	1	24	5	11	40	20	7	13	40	2	1
Totals -	-	65	4	43	7	19	69	40	9	20	69	3	1

Table 2.—Presentations.

Child 1. Child 2.	Vertex Vertex	Vertex Breech	Breech Vertex	Breech Breech	Vertex Comp'nd	Breech Shoulder	Vertex Comp'nd	Breeeh Shoulder
Category A	15	6	4	1	2	1		
Category B	23	6	5	4			1	1
Totals -	38	12	9	5	2	1	1	1

Table 3—Showing Weights of Infants.

			Under 5 lbs.	5 - 6 lbs.	6-7 lbs.	Over 7 lbs.
Category A	•		22	22	13	1
Category B	-	-	41	17	9	13
Totals	-	-	63	39	22	14

Table 4—Showing Mode of Delivery.

			Spontaneous.	Foreeps.	Cæsarean Section.	Manual Breech.
Category A	-	-	37	9	4	. 8
Category B	•		55	9	2	14
Totals		- 1	92	18	6	22

# 2. Triplets.

There was 1 case of triplets during the year, but the patient was dismissed undelivered.

# OBSTETRICAL OPERATIONS.

A Summary of the various Obstetrical Operations is given in the following Tables.

#### 1. Forceps.

Forceps was applied in 456 cases, 348 of which were primiparæ and 108 multiparæ. The results are shown in the following tables:—

#### (1) PRIMIPARAE.

Indication for	No. of	Mot	her.		Child.	exia.	sis.	
Operation.	Cases.	Alive.	Died.	Alive.	S.B.	Died.	Pyrexia	Sepsis.
Contracted pelvis - Contracted pelvis &	16	16		8	8		2	1
occipito-posterior	6	6		6	_		$\overline{2}$	
Occipito-posterior -	64	64		54*	7	4	8	2
Second stage delay	230	226	4	210†	13	9	15	$\frac{2}{5}$
Prolapsed cord -	1	1			_	1		
Compound				1				
presentation -	3	3		2	1			1.
Face presentation -	3	3		2	1			1
Eclampsia	16	13	3	12	3	1	4	
Heart disease -	9	9		7		2	1	
Totals	348	341	7	301	33	17	32	10

^{*} Twins (once).

## (2) Multiparae.

	1	]	1	1	1	1		1
Contracted pelvis -	22	22		18	3	1	1	
Occipito-posterior -	17	15	2	12	2	3	4	
Second stage delay	55	54	1	37	13*	6		
Prolapsed cord -	5	5		4	1	_		
Brow presentation	2	2		1	1			
Face presentation -	1	1				1	1	
Compound								
presentation -	4	4		3	1			
Heart disease -	2	2		2			1	
						<u> </u>		<u> </u>
Totals	108	105	3	77	21	11	7	
					j			

^{*} Twins (once).

[†] Twins (twice).

#### 2. Cæsarean Section.

# (1) CLASSICAL OPERATION.

Indication for No. of		Mot	her.	Child.			Pyrexia.	Sepsis.
Operation.	Cases.	Alive.	Died.	Alive.	S.B.	Died.	Pyr	Sel
*Contracted pelvis - Placenta prævia -	43 29	42 29	1	41 13	$\frac{1}{2}$	1 14	$\begin{bmatrix} 4 \\ 1 \end{bmatrix}$	<u>1</u>
Badobstetric history Heart disease - Disproportion - Others	4 6 5 27	4 6 5 26	_ _ _ 1	4 6 5 24			$\begin{bmatrix} - \\ 2 \\ 3 \end{bmatrix}$	
Totals	114	112	2	93	5	18	10	2

# (2) Lower Uterine Segment Operation.

Contracted pelvis - Disproportion - Others	70 11 11	70 11 11	=	66 11 10	1 1	3	8 2 3	_ _ _
Totals	92	92	_	87	2	3	13	

# 3. Induction of Labour.

## (1) Artificial Rupture of Membranes.

Indication for	Mot	her.		Child.		Misearriage.	vered.
Operation.	Alive.	Died.	Alive.	S.B.	Died.	Misea	Undelivered
Hypertensive toxæmia - External accidental hæmorr-	133	2	113*	19	8	2	_
hage	40		30	6	4		
Mixed and concealed accidental hæmorrhage - Hydramnios Heart disease Contracted pelvis	20 11 19 22	1 1	2 4† 15 19†	$\begin{array}{c c} 16 \\ 5 \\ \hline 2 \end{array}$	4† 1 3 3	$\begin{bmatrix} -2 \\ 1 \\ - \end{bmatrix}$	_ _ _
Malpresentation (version performed)  Eclampsia Pyelitis Placenta prævia Post-maturity Late vomiting Tuberculosis Others	12 9 8 11 11 5 2 24	. — 1 1 — 1	$ \begin{array}{c} 11 \\ 5 \\ 7 \\ 8 \\ 10 \\ 3 \\ \hline 19 \end{array} $	$\begin{bmatrix} \frac{1}{2} \\ -\frac{1}{4} \\ \frac{1}{4} \end{bmatrix}$	1 2 3 1 2 1 1	1 - - - 1	
Totals	327	8	246	57	34	7	1

^{*} Twins (seven times). † Twins (once).

# (2) Separation of Membranes.

Hypertensive toxæmia Post-maturity Contracted pelvis - Others	- - - -	6 3 1 2	_ _ 1	$\begin{array}{c} 6 \\ 3 \\ 1 \\ 2 \end{array}$	_	_ _ _ 1	_ _ _	
Totals	-	12	1	12		1		

## 4. Version.

# (1) EXTERNAL.

Indication for	Mother.			Child.	Miscarriage.	Unde-	
Operation.	Alive.	Died.	Alive.	S.B.	Died.	Miscal	livered
Shoulder presentation - Breech presentation -	5 129	<u> </u>	3 67	9			$\begin{bmatrix} 2 \\ 54 \end{bmatrix}$
Totals	134	1	70	9	1	_	56

# (2) Internal.

Shoulder presentation - Shoulder and prolapsed cord Prolapsed cord Plural pregnancy Face presentation Compound presentation - Placenta prævia	16 7 4 3 2 3 4	1   	8 3 2 3 1 2	$\begin{bmatrix} 9 \\ 4 \\ 2 \\ -1 \\ -4 \end{bmatrix}$			- - - - -
Totals	39	1	19	20	1	_	

# (3) BIPOLAR.

Placenta prævia Prolapsed cord Shoulder presentation -	$egin{pmatrix} 4 \ 2 \ 1 \ \end{bmatrix}$	_ _ _	<u> </u>	4 1 —	<u>-</u> 1		_ _ _
Totals	7		1	5	1	-	

#### 5. Manual Removal of Placenta.

Reason for Removal.	Mod	her.	Sepsis.	Pyrexia.
neason for nemoval,	Alive.	Died.	$\mathbf{gep}$	Pyre
Retained placenta Retained placenta and post-partum hæmorrhage	27 22	3	3	2 2
Totals	49	3	5	4

The cause of death in the three cases was obstetric shock.

In 24 of the cases (46.2 per cent.) the child had been born before admission of the patient to hospital. Of these cases 2 died. One developed pyrexia and 3 sepsis.

#### 6. Craniotomy.

Craniotomy was performed in 5 cases, twice because of contracted pelvis and disproportion, once because of disproportion, once because of hydrocephalus, and once because of face presentation. There were no maternal deaths and no cases of sepsis or pyrexia.

7. Perforation.

Indication fo	or Op	peratio	11.	1	Mot	her. Died.	Sepsis.	Pyrexia.
Contracted pelvis Malpresentation Hydrocephalus Prolonged labour Mixed accidental primigravidæ Occipito-posterior	-	- - - - - - - -	- - hage -	- - - - in -	3 2 7 5 2 2		$\begin{bmatrix} 1 \\ - \\ 3 \\ - \\ 1 \end{bmatrix}$	
Totals,	-	-	-	-	21	2	5	1

The after-coming head was perforated in 4 cases. In 4 cases delivery was completed by forceps, in 4 cases delivery was manual, in 13 cases delivery was by traction, in one case spontaneous, and one case died undelivered.

# 8. Oophorectomy, Ovariotomy, and Salpingo-oophorectomy.

T 11	Mot	her.				
Indication for	: Ope	eration	•		Alive.	Died.
Ovarian cyst -		-		_	3	
*Ruptured uterus	-		-	-	1	1
Ectopic pregnancy	••	-	•	-	1	
Ovarian fibroid -	-	-	-	-	1	
Salpingitis	-	-	-	-	1	
Totals -	-	-	•	•	7	1

^{*} Subtotal hysterectomy also performed.

9. Hysterotomy.

In direction for Constitution	Mot	ther.		
Indication for Operation.	Alive.	Died.	Sepsis.	Pyrexia.
Pulmonary tuberculosis	7			1
Heart disease	5			
Hypertensive toxemia	5	—	—	_
Hyperemesis	1	3		_
Chronic nephritis	4			— — — —
Eclampsia	1*	—		_
Diabetes	1		—	
Disseminated sclerosis	1			
Others	2	_		
			•	
Totals	27	3	_	1

^{*} Vaginal hysterotomy.

10. Hysterectomy.

r 1' - 4' - 6-	Mot	ther.					
Indication for Operation.				Alive.	Died.	Sepsis.	Pyrexia.
Ruptured uterus - Hydat. mole - Fibroids Carcinoma of cervix	-	-	- - -	$\begin{array}{ c c }\hline 2\\1\\2\\1\\\end{array}$	1 	 	1.
Totals -	•		-	6	1		1

#### 11. Blood Transfusions.

One hundred and thirty-one patients were treated by blood transfusion, 152 transfusions in all being given.

Condition.	Retained Placenta and P.P.H.	P.P.H.	Abortions.	Accidental Hæmorrhage.	Placenta Prævia.	Anæmia.	Obstetric Shock.	Ectopic Pregnancy.	Rupture of Uterus.	Cæsarean Section.	Inversion of Uterus.	Totals.
o. of cases -	43	9	13	20	15	13	13	1	2	1	1	131
Taternal deaths	5	1		5		3	5	_	1			20

In 29 of the cases where there was post-partum hæmorrhage and retained placenta, the child had been born before the patient was admitted to hospital and 5 of the mothers died.

#### 12. Various other Operations.

Reposition of in	verte	ed uto	erus	-	-	-	1
Cleidotomy -	•	-	-		-	-	1
Avulsion of cerv	ical	polyp	ous	-	-	-	1
Decapitation	qu.	-	-	-	-	-	2
Myomectomy	-	-	-	-	-	-	1
Laparotomy -	••	-	-	-	-	-	1
Curettage -	-	-	-	-	-	-	201
						,	
	To	tal	-	-	-	-	208

# CONTRACTED PELVIS.

under ante-natal supervision at the hospital clinic. There were 2 maternal deaths, one from peritonitis There were 275 cases of contracted pelvis admitted in the year 1940, and of these 184 had been following classical cæsarean section and one died under anæsthesia during laparotomy. Puerperal sepsis occurred in 3 cases and puerperal pyrexia in 27 cases; 242 infants (90.6 per cent.) were born alive and of this number 11 died. There were 25 (9.4 per cent.) still-births. The infantile mortality rate has been calculated on the percentage of infantile deaths to live births.

The standard of contracted pelvis used has been those cases with a D.C. of under  $4\frac{1}{2}$  inches.

A.—Cases under Ante-natal Supervision at Hospital Clinic (Total, 184).

# PRIMIPARAE.

	.ls	ToT	no no → no	10
	.sis	$_{ m Geb}$		1
	.six	Pyre	m m → m	10
	per cent.	Ch.	4.7	3.4
	Mortality per cent.	M.	14.3	1.4
		Died.		63
	Child.	S.B.		م
		Alive.	23 12 16 16	28
	Mother.	Died.	-	, <del></del>
	Mot	Alive.	25 15 6 17 1	69
	No. of	Cases.	25 15 17 17	20
			1 1 1 1 1 1	ŀ
			1 1 1 1 1 1 1	ı
	erv		- uc	1
	Mode of Delivery.		section setion action	v2
			rean send truck tr	Totals -
			eous cæsare ion a breec	
			Spontaneous	
			CKC LCKC	

MULTIPARAE.

•Is:	tоТ	느   21 4	
.sis	dəS		
,six.	· Pyre	-   c/ 4	L-
per cent.	Ch.	8.9 9.1 6.7	7.3
Mortality per cent.	M.	100.0	6.0
	Died.	4   0 0 1	∞
Child.	S.B.		70
	Alive.	*24 00 88   2   1	101
Mother.	Died.		
Mot	Alive.	30 30 23 11 23 11 12 13 13	113
A CA	Cases.	24 11 20 20 10 10 10 10 10 10 10 10 10 10 10 10 10	114
		1 1 1 1 1 1	3
		( ( 1 1 1 1 1	•
	very.	o a a	•
	of Deli	section raction raction -	- sl
	Mode of Delivery.	sarean rean s and t	Totals
		neous s - al cæs cæsai vtion l bree	
		Spontaneous Forceps Classical cæsarean section L.U.S. cæsarean section Perforation and traction Manual breech Cndelivered	

* Twins (once).

B.—Others (Total, 91).

Primiparae.

0 0	$\infty$
-     -	67
2 2 1 1 1 1 1 2 2	9
w ro     -	6
0 2 2   1	32
	.
13, 12, 13, 11, 11, 11, 11, 11, 11, 11, 11, 11	43
13 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	43
1 1 1 1 1 5	1
Spontaneous	Totals

* One miscarriage.

MULTIPARAE.

	Tal.	оТ	-	್ತಾ
	siso	IəS	-	<u></u>
	.sixe	Pyr	1 2 1 1	4
	per cent.	Ch.	12.5	2.4
	Mortality per cent.	M.		
		Died	-	_
	Child.	S.B.		9
		Alive.	15 7 9 9	40
	Mother.	Died.		
	Mot	Alive.	15 11 9 9 - 1	48
	No. of	Cases.	15 11 9 9 1	48
				•
			, , , , , , ,	•
		ry.		1
	Mode of Delivery.		section ction	70
			rean an se nd tre	Totals
	2	Ĭ	cæsa esare on ar breech	Σ,
-			Spontaneous	
			Sport Clark Charles Clark Charles Char	

Groups A and B (Total, 275).

	1 1 1 1 9 9 5 6 7	59
	-	3
	o 10 00 1 - 1	26
	6. τ.	4.6
	2:3	0.73
	10 co co co	11
wiew L (Locue, 210).	421-146	25
207	88 33 41 65 65 1	231
	-       -	5.
Tr edmoin	98 774 68 84 1 1	273
	98 74 48 48 10 10 10	275
	1 1 1 1 1 1 1 1	•
		1
	Spontaneous Classical cæsarean section L.U.S. cæsarean section Perforation and traction Manual breech Abdominal hysterotomy Undelivered	Totals -

#### Contracted Pelvis. 1.—Induction of Labour.

Surgical induction of labour by puncture of the membranes was performed 30 times during the year. Three infants were still-born (one was anencephalic and one was hydrocephalic). Spontaneous delivery occurred in 18 cases. There were 3 infantile deaths (twins, once). Seven cases required delivery by forceps in one of which the child was still-born and four cases required delivery by lower uterine segment cæsarean section. One case was delivered by craniotomy. The child was hydrocephalic with spina bifida.

Successful medical induction was performed in one case. The child was born spontaneously.

#### Contracted Pelvis. 2.—Spontaneous Delivery.

Spontaneous delivery occurred in 98 cases of contracted pelvis. An analysis of the degree of contraction, weight of the child and duration of labour has been made. There were no maternal deaths in the cases admitted in 1940, but one case admitted in 1939 died in 1940 and is included in the maternal deaths (see No. 4474). The still-birth rate was 4.1 per cent. and the combined pyrexia and sepsis rate was 7.1 per cent. Among the 4 cases in which still-birth occurred intrauterine death was noted in 2 cases and one case was an anencephalic. There were 5 infantile deaths. One case of hydramnios with a vaginal septum was induced surgically and miscarried.

The following complications of pregnancy occurred—hypertensive toxæmia, 14 cases; heart disease, 3 cases; hydramnios, 1 case; and eclampsia, 1 case. Labour was complicated by breech presentation in 6 cases.

Analysis of Spontaneous Delivery in cases of Contracted Pelvis.

Weight of	Duration of		CATEGORY A.			CATEGORY B.	
Child.	Labour.	D.C. under $3\frac{3}{4}$ ins.	D.C. $3\frac{3}{4} - 4\frac{1}{4}$ ins.	D.C. over $4\frac{1}{4}$ ins.	D.C. under $3\frac{3}{4}$ ins.	D.C. $3\frac{3}{4} - 4\frac{1}{4}$ ins.	D.C. over 44 ins.
	Under 12 hours		15	4		∞	
Under 7 lbs.	12–24 hours	1	10	ଷ	1	9	
	Over 24 hours -	1	1	1	9	ಣ	1
	Under 12 hours	_	111	4		4	1
7-8 lbs.	12–24 hours		∞		1	ಣ	1
	Over 24 hours -		6.1	ે છા	1	7	1
	Under 12 hours -		4	67	1		1
Over 8 lbs.	12-24 hours -	1	61	П	1	1	l
	Over 24 hours -	1	61	1	1	1	1
Totals	sl		54	16		25	
	Pyrexia		က			27	
	Sepsis						

CONTRACTED PELVIS.

3.—Forceps Delivery.

Forty-seven cases of contracted pelvis were delivered by the forceps. There were 12 still-births. Among the cases in which still-births occurred, labour was complicated by prolapse of the cord in 2 cases and 2 cases had been failed forceps delivery outside. There were 5 cases of pyrexia and 1 case of puerperal sepsis which gives a combined pyrexia and sepsis rate of 12.8 per cent. The cause of pyrexia was unknown in 3 cases and mastitis in 2 cases. The case of sepsis was in one of the failed forceps cases and was a hæmolytic streptococcal infection. She was dismissed well from Belvidere Hospital.

A.—Cases under Ante-natal Supervision at Hospital Clinic.

			r at		Re	sult.	of .	11.	or 3.	
Reg. No.	Age.	Parity.	Maturity at Delivery.	D.C.	M.	Ch.	Weight Child.	Labour.	Pyrexia or Sepsis.	Remarks.
			wks.	ins.			lbs.	hrs.		
-	1		I WKS.	I IIIs.		1	l lus.	l III'S.		
4.	35	5	40	$ 4\frac{1}{4} $	A	A	81/2	19		High forceps.
$5\overline{2}$	24	1	40	$4\frac{1}{8}$	A	A	$ \begin{array}{c c} 8\frac{1}{2} \\ 5\frac{3}{4} \\ 6\frac{1}{2} \\ 7\frac{3}{4} \end{array} $	20		L.O.P. manual rotation.
205	28	1	40	$  4\frac{1}{4}  $	A	A	$6\frac{1}{2}$	32		R.O.P. manual rotation.
245	25	1	39	PJR	A	A	$7\frac{3}{4}$	59		Hyp. tox. Breech. Ext. version.
										Surg. ind. A.R.M. Mid forceps.
454	34	$\frac{2}{2}$	40	$\frac{4\frac{1}{4}}{1}$	A	A	$5\frac{3}{4}$	$\frac{9}{10}$		Low forceps.
950	30	1	40	$4\frac{1}{8}$	A	D	$6\frac{1}{4}$	18		Low forceps. Cardiac. Auricular fibrillation.
1034	36	2	38	$4\frac{1}{4}$	A	A	$5\frac{3}{4}$	15		Low forceps.
1339	$\begin{vmatrix} 30 \\ 20 \end{vmatrix}$	$\tilde{1}$	42	$\begin{vmatrix} 4\frac{1}{4} \\ 4\frac{1}{4} \end{vmatrix}$	A	$\begin{array}{ c c }\hline A \\ A \end{array}$	$8\frac{3}{4}$	$\frac{13}{32}$		Hyp. tox. O.P. Manual rotation.
1000	20		1.44	-4	23.	11	4	02		Forceps.
1517	20	1	40	PJR	A	A	$6\frac{3}{4}$	45	P	R.O.P. Manual rotation. Forceps.  Mastitis.
∫1658	40	1			A					Hyp. tox.
1829			39	4	A		$4\frac{3}{4}$	37		Second stage delay. Mid forceps.
										Manual removal of placenta.
1671	35	4	40	4	A	SB	$5\frac{1}{2}$	3		Prol. cord. Mid forceps.
1785	23	1	37	$4\frac{1}{4}$	A	A	$6\frac{3}{4}$	9	P	Surg. ind. A.R.M. Mid forceps. P.U.O.
2216	33	2	40	$3\frac{7}{8}$	A	A	7	14		Low forceps.
2288	28	2	39	$\begin{vmatrix} 4\frac{1}{4} \end{vmatrix}$	A	A	$7\frac{1}{4}$	11		Surg. ind. A.R.M. Mid forceps.
2321	28	1	39	$  \frac{3\frac{7}{8}}{1}  $	A	SB	6	12		Face and occiput grip. Mid forceps.
2345	18	1	40	$egin{array}{c} 4rac{1}{4} \ 3rac{7}{8} \ 4rac{1}{4} \ 3rac{3}{4} \ \end{array}$	A	A	$\frac{6\frac{3}{4}}{1}$	16		Low forceps.
2443	28	3	39		A	A	$6\frac{1}{2}$	20		Low forceps.
$\begin{array}{c} 2462 \\ 2686 \end{array}$	$\begin{array}{c c} 30 \\ 23 \end{array}$	1	$\begin{array}{ c c }\hline 39 \\ 40 \\ \end{array}$	$\begin{bmatrix} 4 \\ 4 \end{bmatrix}$	$egin{array}{c} A \ A \end{array}$	$\left  egin{array}{c} A \\ A \end{array} \right $	$5\frac{\overline{3}}{4}$	$\begin{array}{c} 14 \\ 36 \end{array}$	·	Low forceps.
$\begin{array}{c} 2697 \\ \end{array}$	$\frac{25}{35}$	$\frac{1}{3}$	$\frac{40}{40}$	$\frac{4}{4\frac{1}{8}}$	$egin{array}{c} A \ A \end{array}$	$\begin{array}{c c} A \\ A \end{array}$	$egin{array}{c} 8\frac{1}{2} \\ 7\frac{3}{4} \end{array}$	30 8		Mid forceps. Assymetrical pelvis.
2001	. 50	3	7.0	<u> </u>	21	A	4			Marked œdema. Surg. ind. A.R.M. R.O.P. Manual rotation. Mid
										forceps.
2712	28	1	40	$\mid 4 \mid$	A	SB	$6\frac{1}{4}$	30		Mid forceps.
				!			4			

Reg. No.	Age.	Parity.	Maturity at Delivery.	D.C.	M.	Ch.	Weight of Child.	Labour.	Pyrexia or Sepsis.	Remarks.
		l	wks.	ins.			lbs.	hrs.		
$ \begin{array}{c} 2745 \\ 2787 \\ 3045 \\ 3535 \end{array} $ $ 3538 \\ \begin{cases} 3844 \\ 3874 \end{array} $	26 27 19 — 20 19 —	2 1 - 2 1	40 40 34 40 40 39 40	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	A A A A A	A A A A	$ \begin{array}{c c} 5 \\ 7\frac{1}{4} \\ \hline 7\frac{1}{4} \\ \hline 7\frac{3}{4} \\ \hline 6 \end{array} $	$ \begin{array}{c c} 14 \\ 9 \\ \hline 42 \\ 10 \\ \hline 5 \end{array} $	— — Р	Mid forceps. Mid forceps. Hyp. toxæmia. Surg. ind. A.R.M. Face and occiput grip. Rotation to O.A. at outlet. Mid forceps. Deep transverse arrest. Manual rotation. Mastitis. Anæs. exam. Mid forceps. Face and occiput grip.

						/	1			
157	23	1	40	$4\frac{1}{8}$	A	A	$8\frac{1}{4}$	35		Mid forceps. R.O.P. Manual rotation.
221	39	8	40	$4\frac{1}{4}$	A	SB	8	16	—	Compound presentation. V. and hand
										Prol. cord. Hand replaced. High forceps.
421	37	11	40	$4\frac{1}{4}$	A	A	$6\frac{1}{4}$	11		High forceps. Face and occiput grip.
679	36	4	40	4	A	A	$6\frac{1}{4}$ $6\frac{1}{2}$ $7\frac{3}{4}$	51		Mid forceps.
775	36	5	40	$4\frac{1}{4}$	A	A	$7\frac{3}{4}$	31	—	Transverse arrest. Manual rotation.
868	32	1	40	$4\frac{3}{8}$	A	SB	63	39		Mid forceps. Surg. ind. A.R.M. Low forceps.
890	$\frac{32}{36}$	6	40	$4\frac{3}{8}$	$\stackrel{\mathbf{A}}{\mathbf{A}}$	A	$6\frac{3}{4}$ $9\frac{1}{2}$	18		Mid forceps. Face and occiput grip.
000			10	-8	21		0.2			Rotation to O.A. at outlet.
1563	27	1	40	4	A	A	$5\frac{1}{4}$	21	P	L.O.P. Manual rotation. Mid
										forceps. P.U.O.
2221	30	4	40	$4\frac{1}{4}$	A	A	8	57	_	Mid forceps.
2280	29	1	<b>4</b> 0	4	A	SB	$8\frac{1}{2}$	150	S	F.F.O. Mid forceps. Cleidotomy. Hæm. strep.
2489	33	2	40	$4\frac{3}{8}$	A	$\mathbf{A}$	$7\frac{1}{2}$	15		Low forceps.
2835	$\frac{33}{22}$	$\frac{1}{1}$	40	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	A	$\frac{1}{SB}$	$6\frac{3}{4}$	66		Hyp. tox. Mid forceps.
2899	30	$\frac{1}{2}$	$\begin{vmatrix} 10 \\ 40 \end{vmatrix}$	$\frac{1}{4}$	A	$\tilde{\mathrm{D}}$	$9^4$	18		High forceps.
2924	19	1	40	$4\frac{1}{4}$	A	SB	$9\frac{1}{2}$	26	P	Transverse arrest. Manual rotation.
				_						Mid forceps. P.U.O.
3392	25	3	40	$4rac{3}{8}$ .	A	A	$8\frac{3}{4} \\ 7\frac{1}{2}$	10	_	Low forceps.
3465	29	1	40	$4\frac{1}{8}$	A	SB	$\frac{7\frac{1}{2}}{3}$	59	_	Mid forceps.
3504	36	1	39	$4\frac{1}{4}$	A	$\mathbf{A}$	$6\frac{3}{4}$	33	_	Hyp. tox. Surg. ind. A.R.M. Mid
3657	38	5	40	$4\frac{1}{4}$	A	SB	$7\frac{1}{2}$	27		forceps.  Hyp. tox. F.F.O. Transverse arrest.
9091	30		10	14	11	ND.	1 2	2.		Face and occiput grip. Rotated to
										O.A. at outlet.
3938	24	1	39	$4\frac{1}{4}$	A	A	$7\frac{1}{4}$	33	—	Transverse. Face and occiput grip.
										Rotated to O.A. at outlet. Mid
4010	90	10	40	4.1	Α	SB	0	25		forceps.
4210	38	10	40	$4\frac{1}{8}$	A	DD	8	25		High forceps. Walcher position. Face and occiput grip.
4351	33	1	40	$4\frac{1}{4}$	A	A	$7\frac{1}{2}$	87		Mid forceps. Face and occiput grip.
2302				4			2			Rotation to O.A. at outlet.

#### Contracted Pelvis. 4.—Cæsarean Section.

One hundred and eleven cases of contracted pelvis were delivered by cæsarean section, the classical operation being performed in 44 cases and the lower uterine segment operation in 67 cases. There was 1 maternal death, giving a death rate of 0.9 per cent. for the combined groups. One case died from peritonitis following the classical operation (see Case No. 1217 under deaths).

There were 2 still-births—one was the lower uterine segment operation and one was the classical operation. There were 4 infantile deaths.

There were 14 cases of puerperal pyrexia in the combined group, giving a pyrexia rate of 12.6 per cent. Five cases of pyrexia occurred in cases where the classical operation had been performed. In one case the pyrexia was of urinary origin, in one case it was due to peritonitis, in one to mastitis, and in 2 cases the origin could not be determined. Nine cases of pyrexia occurred in cases where the lower uterine segment operation had been performed. In 5 cases the origin of the pyrexia could not be determined, in 2 cases it was of urinary origin and in 2 cases it was due to mastitis. The pyrexia rate was 11.4 per cent. for the classical operation and 13.4 per cent. for the lower segment operation.

4.—CLASSICAL OPERATION.

A	-Cases	under	Ante-natal	Supervisio	n at Hospital	Clinic.
1		1	q,	ic		

Reg No	Age.	Parity.	Maturity at Delivery.	D.C.	Res	Ch.	sq Weight of Child.	Sterilised.	Spinal Anæsthetic	Pyrexia or Sepsis	Remarks.
$\begin{array}{c} 93 \\ 365 \\ 410 \\ 1214 \\ 819 \\ 1217 \\ \\ 1355 \\ 1488 \\ 1495 \\ 1680 \\ 2170 \\ 2251 \\ 2454 \\ 4065 \\ \end{array}$	$ \begin{array}{c c} 40 \\ 24 \\ 30 \\ \hline 37 \\ 25 \\ \hline 28 \\ 27 \\ 36 \\ \hline 17 \\ \hline 29 \\ 27 \\ \end{array} $	$ \begin{array}{c c} 3 \\ 3 \\ 2 \\ 1 \end{array} $ $ \begin{array}{c c} 1 \\ 2 \\ 1 \\ - \\ 1 \\ 1 \end{array} $	$ \begin{array}{c c} 39 \\ 40 \\ \hline$	$\begin{array}{c} 4\frac{1}{4} \\ 4 \\ \hline - \\ 4\frac{1}{4} \\ 3\frac{3}{4} \\ 4\frac{1}{4} \\ 4 \\ \hline - \\ 3\frac{7}{8} \\ \hline - \\ 4 \\ 4 \\ 3\frac{5}{8} \\ \end{array}$	A A A A D A A A A A A A A A A A A A A A	A A A A A A A A A A A	$\begin{bmatrix} 6\frac{1}{2} \\ 7 \\ -\frac{1}{7\frac{1}{4}} \\ 6\frac{1}{2} \\ 6\frac{3}{4} \\ -\frac{5\frac{1}{2}}{7\frac{3}{4}} \\ -\frac{5\frac{1}{2}}{8\frac{1}{4}} \\ 5\frac{1}{2} \\ \end{bmatrix}$	+	- + - + + - + - +	P P 	Cardiac. Mitral stenosis. Short trial labour. Late vomiting. W.R. + Disproportion. P.U.O. Breech. General peritonitis. (See under deaths.) Hyp. tox.  Hyp. tox.  Breech. Spontaneous version to vertex. Trial labour, 12 hours.

Reg No Age.	Parity.	Maturity at Delivery.	D.C.	Res	Ch.	्र Weight of Child.	Sterilised.	Spinal Anæsthetic.	Pyrexia or Sepsis	Remarks.
$\begin{array}{c cccc} 217 & 23 \\ 646 & 29 \\ \hline \\ 1763 & 29 \\ 1771 & 23 \\ 1805 & 30 \\ 1913 & 38 \\ 3283 & 21 \\ 3552 & 29 \\ \hline \end{array}$	1 1 2 1 5 2	40 40 40 40 40 39 42 40	$egin{array}{c} 3^{7}_{8} \ 4^{1}_{4} \ 4 \ 4^{1}_{8} \ 3^{1}_{2} \ PJR \ 3^{5}_{8} \ 4^{3}_{8} \ \end{array}$	A A A A A A	A A A A A A	$ \begin{array}{c c} 8\frac{1}{2} \\ 5\frac{1}{2} \end{array} $ $ \begin{array}{c c} 7 \\ 6\frac{1}{4} \\ 6\frac{1}{4} \\ 7\frac{1}{2} \\ 6\frac{3}{4} \end{array} $	- - + -	+ + + + + + + + + + + + + + + + + + + +	  -  -  -  -  -  -	Resuture of wound. Bilateral phlegmasia. Admitted in labour. Admitted in labour. Admitted in labour. Cardiac. Mitral. Sterilised. Admitted in labour. Hyp. tox. Mastitis.

# CLASSICAL OPERATION (REPEAT SECTION).

# A.—Cases under Ante-natal Supervision at Hospital Clinic.

								,		<del></del>	
407 505	$\begin{bmatrix} 25 \\ 31 \end{bmatrix}$	$egin{pmatrix} 4 \ 2 \end{bmatrix}$	$\begin{vmatrix} 36 \\ 36 \end{vmatrix}$	$\frac{}{3\frac{3}{4}}$	A A	A D	$\begin{bmatrix} 6\frac{1}{4} \\ 6\frac{1}{4} \end{bmatrix}$	++	- +	<u> </u>	Admitted in labour.
828	30	$\frac{1}{2}$	$\begin{vmatrix} 30 \\ 40 \end{vmatrix}$	$\frac{3\frac{4}{7}}{3\frac{7}{8}}$	$\stackrel{\Lambda}{A}$	A	$6^4$	+	+		
872	$\begin{vmatrix} 30 \\ 31 \end{vmatrix}$	$\frac{1}{2}$	$\frac{10}{34}$	<del></del>	$A^{\circ}$	A	$5\frac{3}{4}$	+	+		
1343	$\begin{vmatrix} 31 \\ 40 \end{vmatrix}$	$\frac{1}{2}$	39	<u> </u>	A	A	$6\frac{1}{2}$	+			
1539	33	$\overline{2}$			A		<u> </u>	_	_		Oedema.
1687	_	_	33	4	A	A	8	+	+		Coucinu.
1931	31	2	38	$4\frac{1}{4}$	A	A	8	+			
2719	38	4	39	$4\frac{1}{4}$	A	A	$6\frac{1}{2}$	+	_		
2906	24	2	40	$3\frac{3}{4}$	A	A	8	+	_	P	Breech. Pyrexia, urinary.
3043	29	2	40	$4\frac{1}{4}$	A	A	$6\frac{3}{4}$	+	_		Previous L.U.S. section.
3084	29	2	39		A	A	7	+	+		G.C.P.
3318	22	2	39		A	A	6	+	+		G.C.P.
3522	31	2	39	$3\frac{1}{4}$	A	SB	$6\frac{1}{2}$	_	+		
3591	37	3	37	4	A	A	$7\frac{1}{4}$	+	+		Two previous L.U.S. sections.
3628	34	2	40	$3\frac{1}{2}$	A	D	4	+	_	i	Child died of pneumonia.
3631	36	2	39	<u> </u>	A	A	7	-	+	—	G.C.P.
3854	26	3	39	_	A	A	7	+	-	_	G.C.P.
3953	39	2	40	$3\frac{1}{4}$	A	A	6	+	-	_	
4060	27	4	40	4	A	A	$6\frac{3}{4}$	+	-	_	

		1		1	1		1	1			
555	24	2	39	4	$\mathbf{A}$	A	$6\frac{3}{4}$	_	_		Irregular dismissal.
576	30	$\frac{1}{2}$	40	$3\frac{3}{4}$	A	A	8	+	_		
1002	33	2	38	—	A	A	$7\frac{3}{4}$	+	* +	-	G.C.P.
2169	24	4	40	4	A	$\mid A \mid$	$7\frac{1}{2}$	+	-	—	Two previous sections.
4236	25	4	40		A	$\mathbf{A}$	$7\frac{1}{2}$	+	-		Rachitic pelvis.
4242	25	2	40	$3\frac{3}{4}$	A	A	$8\frac{3}{4}$	+	-	P	P.U.O. Irreg. dismissal.
-											

# 5.—Lower Uterine Segment Operation.

# A.—Cases under Ante-natal Supervision at Hospital Clinic.

											*
Reg No	Age.	Parity.	Maturity at Delivery.	D.C.	Res	ch.	Weight of Child.	Sterilised.	Spinal Anæsthetic.	Pyrexia or Sepsis	Remarks,
			wks.	ins.	TIT.		lbs.		S	P.	
387	34	3	39	$4\frac{1}{4}$	A	A	$8\frac{1}{4}$	_	+		Seven and a half hours' trial labour.
444 808	28 27	$\begin{bmatrix} 3 \\ 2 \\ 2 \end{bmatrix}$	39 39	$egin{array}{c} 4rac{1}{4} \ 4rac{1}{8} \ 4rac{1}{4} \ \end{array}$	A A	$begin{array}{c} A \\ A \end{array}$	$\begin{bmatrix} 7 \\ 8\frac{1}{4} \end{bmatrix}$	_ _	+	_	Eight hours' labour. Four hours' strong pains.
$\begin{cases} 1184 \\ 1394 \\ 1625 \end{cases}$	<u>29</u>	_	$\frac{-}{39}$	$egin{array}{c c} 4rac{1}{4} \\ \hline 4rac{1}{4} \end{array}$	A A A	$\frac{-}{A}$	7	_ _ _	_ _ _		Chloroform exam. Eleven hours' trial labour.
$\begin{cases} 1520 \\ 1610 \\ 1572 \end{cases}$	$\frac{42}{30}$	$\frac{2}{2}$	$\begin{array}{ c c }\hline 40\\39\end{array}$	$egin{array}{c} -1 \\ 4rac{1}{8} \\ 4rac{1}{4} \\ \end{array}$	$egin{array}{c} A \\ A \\ A \end{array}$	$\begin{array}{ c c }\hline A\\ A\\ \end{array}$	$\begin{bmatrix} -\frac{3}{4} \\ 9 \end{bmatrix}$	_ _ _	_  		Short trial labour Hyp. tox. Short trial labour.
1580 1589 1645	$\begin{bmatrix} 27 \\ 20 \\ 21 \end{bmatrix}$	1 1 1	39 40 40	$egin{array}{c} 4 \\ 3\frac{5}{8} \\ 3\frac{1}{2} \\ \end{array}$	A A A	A A A	$ \begin{array}{c c} 8\frac{1}{4} \\ 7\frac{1}{2} \\ 6\frac{3}{4} \end{array} $		+++	—  -   P	Admitted in labour. R.P. clot. Short trial labour. P.U.O.
$\begin{cases} 1809 \end{cases}$	$\begin{bmatrix} 21\\22 \end{bmatrix}$	$\frac{1}{2}$	_	— .	A			-	-		Transverse lie. Spontaneous correction.
$   \begin{array}{c}                                     $	$\begin{array}{ c c }\hline 27\\28\\ \end{array}$	$\begin{bmatrix} -2\\2\\2 \end{bmatrix}$	$\begin{array}{ c c }\hline 40\\ 39\\ 38\\ \end{array}$	$\begin{array}{c c} 4 \\ 4\frac{1}{4} \\ 4 \end{array}$	$\begin{bmatrix} A \\ A \\ A \end{bmatrix}$	$\begin{array}{ c c } A \\ A \\ A \end{array}$	$\begin{bmatrix} 8 \\ 7 \\ 7 \end{bmatrix}$		+ -	===	Trial labour. Trial labour. Short trial labour.
$\begin{cases} 2088 \\ 2410 \\ 2112 \end{cases}$	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	$\begin{bmatrix} 2\\2\\-1 \end{bmatrix}$	$\begin{vmatrix} -40 \\ 40 \end{vmatrix}$	4 4	A A A	$\begin{array}{ c c }\hline A\\ A\\ \end{array}$	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		-   -   +		Breech Ext. version. Admitted in labour. Hyp. tox. Surg. ind. A.R.M.
2112	31	1	39	$3\frac{1}{2}$	$egin{array}{c} A \end{array}$	A	8	_			Six hours' trial labour.
$2327 \\ 2436$	18 33	$\frac{1}{7}$	40 38	$\frac{1}{4\frac{1}{4}}$	$egin{array}{c} \mathbf{A} \\ \mathbf{A} \end{array}$	A A	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	-   -	+ +		Short trial labour. Hyp. tox. Bad obstetric history. Not in labour.
${2565 \atop 2820}$	24	3	40	$\frac{1}{4\frac{1}{4}}$	A	$\frac{1}{A}$	$\frac{-}{6\frac{3}{4}}$	  - 		_	Observation. Surg. ind. A.R.M.
$ \begin{array}{c} 2596 \\ 52674 \\ 3038 \end{array} $	30 40 —	$\begin{array}{ c c }\hline 6\\ 4\\ \hline -\end{array}$	$\frac{40}{39}$	$\begin{vmatrix} 4\frac{1}{4} \\ - \\ 4 \end{vmatrix}$	A A A	$\frac{D}{A}$	$\begin{array}{c c} 7\frac{1}{2} \\ \hline - \\ 7\frac{3}{4} \end{array}$	_	-+	$\frac{1}{P}$	Surg. ind. A.R.M. Trial labour. Observation. Hyp. tox. Pyrexia, urinary.
2799 $2914$	32 24	1	40 39	$\begin{vmatrix} 4\frac{1}{4} \\ 4 \end{vmatrix}$	$\begin{array}{ c c } A \\ A \end{array}$	A A	$\begin{vmatrix} 7\frac{3}{4} \\ 7 \end{vmatrix}$		+	P	P.U.O. Poor pains.
2950 2997 (3101	$\begin{array}{ c c }\hline 25\\ 23\\ 35\\ \end{array}$	$\begin{bmatrix} 1\\2\\1 \end{bmatrix}$	$\begin{vmatrix} 40\\38\\40 \end{vmatrix}$	$\begin{array}{ c c c } 4 \\ 3\frac{1}{4} \\ 4\frac{1}{8} \end{array}$	$\left \begin{array}{c} A \\ A \\ A \end{array}\right $	A A A	$ \begin{array}{c c} 7\frac{1}{2} \\ 6\frac{3}{4} \\ 6 \end{array} $	_	+++	_	Hyp. tox.  Trial labour.
$\begin{cases} 3633 \\ 3191 \end{cases}$	$\frac{35}{32}$	$\frac{1}{4}$			A A	<u></u>	_	_	-		Mastitis. Observation.
$\begin{cases} 3415 \\ 3195 \end{cases}$	$\frac{}{23}$	$\frac{}{2}$	40   38	$\begin{array}{ c c }\hline 4\frac{3}{8}\\ 4\\ \end{array}$	$\begin{array}{c c} A \\ A \end{array}$	A	$\begin{array}{c c} 8\frac{1}{2} \\ 6 \end{array}$	_	+	P	Short trial labour. Breech. Ext. version. Surg. ind. A.R.M. P.U.O.
3223 3384	23 21	$\begin{bmatrix} 2 \\ 1 \end{bmatrix}$	37 39	$\begin{array}{ c c }\hline 4\frac{1}{4}\\ 4\frac{1}{4}\\ \end{array}$	A	A	$\begin{bmatrix} 7\frac{3}{4} \\ 6 \end{bmatrix}$	-  -	+ +	P —	Pyrexia, urinary. Hyp. tox. Trial labour.
$\begin{cases} 3467 \\ 3505 \\ 3608 \end{cases}$	$\begin{array}{ c c }\hline 22\\\hline -\\\hline 38\\\hline \end{array}$	$\frac{1}{1}$	$\begin{vmatrix} -38 \\ 38 \end{vmatrix}$	$\begin{array}{ c c }\hline 4\\ \hline \\ 3\frac{1}{4}\\ \hline \end{array}$	$\begin{array}{ c c } A \\ A \\ A \end{array}$	A A		_ 			Observation. Admitted in labour. Wound resuture.
				, x				1	1		

Reg No	Age.	Parity.	Maturity at Delivery.	D.C.	Res	Sult.	sq Weight of Child.	Sterilised.	Spinal Anæsthetic.	Pyrexia or Sepsis	Remarks
$   \begin{array}{r}     3655 \\     3865 \\     4047 \\     4131 \\     4105 \\     4114 \\     4206   \end{array} $	24 39 30 — 19 28 25	$\begin{bmatrix} 1 \\ 7 \\ 1 \\ - \\ 1 \\ 2 \\ 1 \end{bmatrix}$	$\begin{vmatrix} 40 \\ \frac{40}{39} \\ 40 \\ 40 \\ 39 \end{vmatrix}$	$egin{array}{c} 4rac{3}{8} \ 4rac{1}{4} \ -rac{1}{8} \ 3rac{1}{2} \ 4 \ 4rac{1}{4} \ \end{array}$	A A A A A A	SB A A A A	$ \begin{array}{c c} 8\frac{1}{4} \\ 9\frac{3}{4} \\ \hline 7\frac{3}{4} \\ 7 \\ 8 \\ 7 \end{array} $	- - - -	+ + + +	_ _ _ _ P	Acute fœtal distress. Wound sepsis. Trial labour. Breech. Spontaneous version to vertex. Poor pains. Disproportion.  Breech. Ext. version. P.U.O. Trial labour. Mastitis.
							B	—Ot7	ners.		'
$\begin{array}{c} 559 \\ 596 \\ \hline \\ 713 \\ 1154 \\ 1219 \\ 1256 \\ 2388 \\ \left\{ 2527 \\ 2722 \\ 2600 \\ 2625 \\ 2829 \\ 2967 \\ 3015 \\ 3332 \\ 3864 \\ 4126 \\ 4228 \\ \hline \\ \end{array}$	22 28 26 32 26 24 34 29 	1 1 1 2 1 1 1 1 1 1 2 2 2 2 2 1	38 39 38 39 40 40 40 —————————————————————————————	$\begin{array}{c} 4 \\ 3\frac{1}{4} \\ 4\frac{1}{8} \\ 4 \\ 4\frac{1}{4} \\ 4\frac{1}{4} \\ 4 \\ 4\frac{1}{4} \\ 4 \\ 3\frac{7}{8} \\ 7\frac{8}{8} \\ 4 \\ - \\ 4 \\ 3\frac{7}{8} \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ - \\ 4 \\ 4$	A A A A A A A A A A A A A A A A A A A	A	$\begin{array}{c} 7\frac{1}{4} \\ 6\frac{1}{2} \\ \\ 5\frac{3}{4} \\ \frac{1}{2} \\ 2\frac{3}{4} \\ 4\frac{1}{4} \\ \\ 7\frac{1}{2} \\ \frac{1}{2} \\ \frac{1}{4} \\$		+.+ ++ +   +  +++	- - - - - - - - - - - - - - - - - - -	Hyp. tox. Rachitic pelvis. Short trial labour. Twelve hours' trial labour. Fourteen hours' trial labour. P.U.O. Thirty hours' trial labour. Short trial labour. Chloroform exam. Short trial labour. Trial labour. Maternal distress. Mastitis. Hyp. tox. G.C.P. Short trial labour. Short trial labour. Hyp. tox. Trial labour. Maternal distress. Admitted in labour. Admitted in labour. Admitted in labour. Irreg. dismissal.

# Lower Uterine Segment Operation (Repeat Section).

A.—Cases under Ante-natal Supervision at Hospital Clinic.

400	20	2	90	0.3			- 1				
480	28	2	39	$3\frac{3}{4}$	A	A	$7\frac{1}{2}$	+	+		
1025	31	4	40	$3\frac{3}{4}$	A	A	$5\frac{1}{4}$	+	+	—	Hyp. tox.
1106	35	2	40	$3\frac{1}{2}$	A	A	$7\frac{1}{2}$	+	+		Hyp. tox.
1503	26	3	40	$3\frac{\bar{3}}{4}$	A	A		+	+		
$\int 1812$	26	2			A			_	_	<u></u>	Observation.
₹ 1915					A			<u> </u>	_		
2503				$3\frac{3}{4}$	A	D	$6\frac{3}{4}$	+	+		Admitted in labour. Spina
							_				bifida.
1859	24	2	39	$4\frac{1}{8}$	A	A	$7\frac{1}{2}$	+	+		
2669	25	3	39	$egin{array}{c} 4rac{1}{8} \ 3rac{3}{4} \end{array}$	A	A	$6\frac{3}{4}$	+	+		
3579	31	2	40	4	A	A	8	+	+		
3917	36	2	39	4	A	A	$5\frac{3}{4}$	+	+		
4183	25	3	38	4	A	A	$7\frac{1}{2}$	+	+		Trial labour.

Reg No.	Age.	Parity.	Maturity at Delivery.	D.C.	Res	sult.	sql Weight of Child.	Sterilised.	Spinal Anæsthetic	Pyrexia or Sepsis	Remarks.
233 315 841 2062	24 34 32 31	$\begin{array}{c} 2 \\ 2 \\ 2 \\ 2 \end{array}$	40 39 40 39	$egin{array}{c c} 4rac{1}{8} \ 4 \ 4rac{1}{4} \ 4rac{3}{8} \ \end{array}$	A A A A	A A A A	$\begin{array}{c} 6\frac{3}{4} \\ 8 \\ 6\frac{3}{4} \\ 5\frac{1}{2} \end{array}$	+ + + + + +	++++++	_ _ _	Breech. Ext. acc. hæm. Four hours, poor pains. Admitted in labour.

#### CONTRACTED PELVIS.

# 6.—Perforation and Traction, Internal Version and Breech Deliveries.

Delivery was effected by perforation and traction in 4 cases. In one case there was a face presentation, in two cases there was prolapse of the cord and in one case there was hydrocephalus and spina bifida. In 3 cases delivery followed internal version and in these cases the indication for operation was shoulder presentation. The 3 infants were still-born. Manual breech delivery occurred in 3 other cases. Abdominal hysterotomy was performed in one case of mitral disease. One case died under anæsthesia, while the abdomen was being incised for cæsarean section. The patient died undelivered.

Perforation and Traction.

A.—Cases under Ante-natal Supervision at Hospital Clinic.

Reg.	Age.	Parity.	Maturity at Delivery.	D.C.	M.	Ch.	sql Weight of Child.	Labour.	Pyrexia or Sepsis.	Remarks.
$ \begin{cases} 612 \\ 1079 \end{cases} $ $ \begin{cases} 1083 \\ 1327 \\ 1570 \end{cases} $ $ 1738 $	26 21 - 25	$\begin{bmatrix} 2 \\ 3 \\ - \end{bmatrix}$		$\begin{bmatrix} -1 \\ 4\frac{1}{4} \\ -4\frac{1}{4} \\ 4\frac{1}{4} \end{bmatrix}$	A A A A		$ \begin{array}{c c} \hline 7_{\frac{1}{4}} \\ \hline - \\ 5_{\frac{1}{2}} \end{array} $ $ 9_{\frac{1}{2}} $			Transverse lie. Prolapsed hand. Failed forceps. Traction with Willet's forceps. External accidental hæmorrhage. Breech. External version. Surg. ind. A.R.M. Craniotomy on hydrocephalic with spina bifida. Manual removal of placenta. Prolapsed cord. Craniotomy.

Reg. No.	Age.	Parity.	Maturity at Delivery.	D.C.	M.	Ch.	sel Weight of Child.	Labour.	Pyrexia or Sepsis.	. Remarks.
2067	32	1	40	$4\frac{1}{4}$	A	SB	$7\frac{1}{2}$	120	S	Face. Persistent mentoposterior. Perforation and forceps. Obstetric shock. Blood transfusion. Mild sepsis.

# 7.—Internal Version.

# A.—Cases under Ante-natal Supervision at Hospital Clinic.

Nil.

## B.—Others.

2766	30	4	40	$4\frac{1}{8}$	A	SB	8	12		Prolapsed cord. Internal version.  Manual breech. Perforation of A.C. head.
2815	31	6	40	$4\frac{1}{2}$	A	SB	12	24	P	Shoulder presentation. Prolapsed
4137	30	3	38	$4\frac{1}{4}$	A	SB	$8\frac{1}{2}$	8		cord. Manual breech. P.U.O. Shoulder presentation. Prolapsed cord. Manual breech.

## 8.—Manual Breech Deliveries.

# $A.—Cases\ under\ Ante-natal\ Supervision\ at\ Hospital\ Clinic.$

$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	
--------------------------------------------------------	--

$\begin{cases} 4091 \\ 4302 \end{cases}$	24	1	$\left  \frac{}{39} \right $	$-rac{-4rac{1}{4}}$	A A	$\left  \begin{array}{c} - \\ A \end{array} \right $	$\frac{-}{6\frac{3}{4}}$	$\frac{-}{36}$		Breech. Failed version. Child had fractured humerus.
------------------------------------------	----	---	------------------------------	-----------------------	--------	------------------------------------------------------	--------------------------	----------------	--	---------------------------------------------------------

# 9.—Abdominal Hysterotomy.

# A.—Cases under Ante-natal Supervision at Hospital Clinic.

Nil.

### B.—Others.

Reg. No.	Age.	Parity.	Maturity at Delivery.	D.C.	M.	Ch.	weight of Child.	Labour.	Pyrexia or Sepsis.	Remarks.
2472	22	1		$4\frac{3}{8}$	A		_	_	-	Cardiac. Mitral. Sterilisation.

## 10.—Undelivered.

# A.—Cases under Ante-natal Supervision at Hospital Clinic.

									1	
970	19	1	36	$ 4\frac{1}{4}$	A				_	Irregular dismissal.
1591	22	1	38	$4\frac{1}{4}$	A				_	Observation.
3018	40	6	40	$4\frac{1}{8}$	D					Laparotomy. Death under anæs-
										thesia. (See under deaths.)
3475	19	1	34	$4\frac{1}{4}$	A	-	-		-	,
3746	19	1	35	$3\frac{1}{2}$	A	_	-	_	_	Was to return for section.
3816	30	1	39	$4\frac{\overline{3}}{8}$	A	_	_	_		
			0							

1107	37	2	30	$4\frac{1}{8}$	A	 	_	 Ext.	acc.	hæmorrhage.

#### DISPROPORTION.

There were 23 cases in this group, i.e., where the pelvic measurements were normal, but there appeared to be disproportion between the presenting part and the pelvis. Eight cases belonged to Category A and fifteen to Category B. Spontaneous delivery occurred in 5 cases (one primipara and four multiparæ). One case was complicated by hypertensive toxæmia. In one case labour was induced medically and in one case surgically by puncture of the membranes.

Two cases were delivered by forceps on account of second stage delay. One case was a high forceps delivery and the other was complicated by hypertensive toxæmia. Fifteen cases were delivered by cæsarean section, ten cases by lower uterine segment section and five by the classical operation. Two of these cases were complicated by hypertensive toxæmia, one by eclampsia and one by hydramnios.

One case required craniotomy. This case was one of failed forceps outside and required blood transfusion after collapse due to obstetric shock.

There were no maternal deaths. All the infants born spontaneously were born alive, but one had a spina bifida.

Of the infants delivered by forceps, one was still-born. All the infants delivered by cæsarean section were born alive. There were no infantile deaths.

There were 3 cases of pyrexia. The pyrexia in 2 cases was of unknown origin and in one case was due to mastitis.

#### ANTE-PARTUM HAEMORRHAGE.

There were 256 cases of ante-partum hæmorrhage admitted during the year; 82 were cases of placenta prævia, 115 were cases of apparent accidental hæmorrhage and 59 were cases of mixed and concealed accidental hæmorrhage.

#### 1.—PLACENTA PRAEVIA.

Of the 82 cases of placenta prævia, 1 died, giving a percentage mortality of 1·2 per cent. The case died of cortical necrosis of suprarenal following spontaneous delivery. There were 21 still-births and 20 infantile deaths. There were 4 cases of puerperal pyrexia and 1 case of puerperal sepsis. Eleven cases received blood transfusions—16 transfusions being given in all.

A.—Cases under Ante-natal Supervision at Hospital Clinic (Total, 15).

Made of Delivers	Ту	Mot	Mother.		Child.		Pyrexia.	Sepsis.		tality	
Mode of Delivery.	Cent.	Partial.	Α.	D.	Α.	S.B.	D.	Pyr	les	М.	Ch.
Spontaneous Spontaneous breech -	<u> </u>	5 —	5 1		3	1 1	1	1		_	25.0
External version, spontaneous breech - Classical cæsarean	1		1			1					·
section	4	4	8	<del></del>	4	_	4			—	50.0
Totals	6	9	15		7	3	5	1			41.7

### B.—Others (Total, 67).

1										
1	29	29	1	21	6	3	1		3.3	12.5
11	10	21		9	2	10	2			52.6
1	3	4		1	3			_	_	
2	1	3		_	4*	_				
	5	5		1	2	2		1		66.7
-	$\begin{array}{c c} 2 \\ 1 \end{array}$	$\begin{vmatrix} 2\\1 \end{vmatrix}$		$\begin{vmatrix} 2 \\ 1 \end{vmatrix}$				_	_	_
	1	1			1			_		
15	52	66	1	35	18	15	3	1	1.5	3.0
	11 1 2 	11 10 1 3 2 1 — 5 — 2 — 1 — 1	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$

^{*} Twins (once).

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Groups A and B (Total, 82).

Mode of Delivery	Ту	pe.	Mot	her.		Child.		Pyrexia.	Sepsis.	Maternal mortality per cent.	Still-birth rate per cent.
Mode of Delivery.	Cent.	Partial.	A.	D.	Α.	S.B.	D.	Pyre	Sep	Mate mort per o	Still- ra per o
Spontaneous Spontaneous breech -	1	34	$\frac{34}{1}$	1	24	$\begin{vmatrix} 7 \\ 1 \end{vmatrix}$	4	2		2.9	14.3
External version, spontaneous breech -	1		1			1				_	
Internal version, manual or spontaneous breech Classical cæsarean	1	3	4		1	3				_	
section Bipolar version, manual	15	14	29		13	2	14	2			51.9
or spontaneous breech Leg brought down, spontaneous breech -	2	$egin{array}{c} 1 \\ 5 \end{array}$	3 5		1	$\begin{vmatrix} 4 \\ 2 \end{vmatrix}$	2		1		66.7
Manual breech Forceps		$\begin{bmatrix} 2 \\ 1 \end{bmatrix}$	$\frac{3}{2}$		$\frac{1}{2}$					_	<del>-</del>
Willet's forceps	_	1	1	_		1					
Totals	21	61	81	1	42	21	20	4	1	1.2	32.6

PLACENTA PRÆVIA.

A.—Cases under Ante-natal Supervision at Hospital Clinic.

		Remarks.			Hyp. toxæmia. Fibroid.	4 >		No fætal heart on admission.	Foot brought down.		Sterilisation. Secondary P.P.H. Blood transfusion	Lioca distingioni.	Spinal anæsthetic.	Ext. podalic version. Leg pulled	 placenta.				Surg. ind. A.R.M.	U.	Surg ind A B. M		ľV.	•	The state of the s
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Remarks.	Spinal anæsthetic. Sterilised.  Spinal anæsthetic. Blood transfusion given after operation.  Spinal anæsthetic.  Surg. ind. A.R.M. Pyrexia, urinary. Placenta born before child completely born.  Surg. ind. A.R.M.  P.P.H. Blood transfusion.  Blood transfusion.  Hyp. tox. Retained placenta.  Manual removal.  Transverse lie. Sterilised.  Hyperennesis (mild)  Spinal anæsthetic.  Transverse lie. Two blood transfusions.  Bilateral phlegmasia.  Thr. abortion.  Observation. Some bleeding.  Leg brought down.
¥ First ⊠ Bleeding.	33 33 33 33 33 33 33 34 40 33 33 33 33 33 33 33 33 33 33 33 33 33
Pyrexia or Sepsis.	
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	irst eding Remarka		36 Surg. ind. A.R.M.	)	34 A.R.M. in labour.		35   Fœtal heart present at beginning	of operation. Blood transfusion following operation.	38   Blood transfusion.		37   P.U.O.				$\mid \text{Transv} \mid$	30   Three blood transfusions.			30 Surg ind A.B. W		cortical necrosis of suprarenals.	(See under deaths.)	— No placenta noted.			in labour.	31 Foetal heart not heard on	admission.	93 Coor   Watering		35 Prol. cord. Hyp. tox. Blood transfusion.
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	oN .	BeH	1382	1544	1586	1611	1664		1745	1	1825	(1897	$\int 2004$	1922	1956	1996			1702 906	$\frac{2}{2147}$		,	2189	2448	2290	0000	8962	8096	2767	,	2641

Remarks		Second stage delay.	A.R.M. in Jabour.		Surg. ind. A.R.M.	A.R.M. in labour.	Hyp. toxæmia.	Spinal anæsmente. Hyp. tox. Shoulder presentation.	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	Irreg. dismissal.	Surg. ind. A.R.M.	)	A.R.M. in labour.	Observation.		rans	Abscess of abdominal wound.				Placenta delivered before child.  Two blood transfusions.		Two blood transfusions.	Surg. ind. A.R.M.	1	Spinal anæsthetic.	ŧ		Forceps to a.c. head.	1	
irst Saing.	⁸ BJee	34	34	39	37	27	40	30	)	38	38	39	30		28	35		1	32	34	<u></u>	36	35	36	40	37	39	40	1	34	
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Mode of	Delivery.	Forceps	eous	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous	Int. version.		Spontaneous -	Spontaneous -	Class. cæs. section	Spontaneous -	1	Class. cæs. section	Class. cæs. section	1	Class. cæs. section	Class. cæs. section	Spont. breech -	Spontaneous -	Spontaneous -	Class. cæs. section	Spontaneous	Spontaneous -	Class. cæs. section	Spontaneous -	Spontaneous -	_	Spont. breech -	
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Condition	Admission	Good	Good	Fair	Good	Good	Good	Good		Good	Good	Good	Good	Good	Good	Fair		Good	Good	Good	Fair	Good	Fair	Good	Fair	Good	Good	Good		Good	
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oN :	]}e	2672	2765	2785	2874	2903	2910	2995		3053	3177	3261	3295	3431	3826	$\int 3454$	$\frac{3916}{}$	3470	3512	3524	3534	3537	3636	3803	3850	3963	3994	4012	4066	4217	

#### 2.—Apparent Accidental Haemorrhage.

There were 115 cases of apparent accidental hæmorrhage. There were 2 maternal deaths. There were 17 still-births and 12 infantile deaths. There was 1 case of puerperal pyrexia and 1 case of sepsis. Seven cases received blood transfusions—8 transfusions in all being given.

A.—Cases under Ante-natal Supervision at Hospital Clinic (Total, 34).

Mode of D	elivery	7.			Mot A	D	A	Child	Died.	Pyrexia	Sepsis
Spontaneous Surg. ind., spontaneous Forceps Undelivered Totals		- - -	- - - -	- - - -	$\begin{bmatrix} 20 \\ 9 \\ 2 \\ 3 \\ \hline 34 \end{bmatrix}$			$\begin{bmatrix} 2\\1\\-\\3 \end{bmatrix}$			
								,			
Chantanaous	В.	Oi	thers	(Tot	 	31).	99	] 10		<u> </u>	1
Spontaneous Surg. ind., spontaneous	B	Oi	thers - -	(Tot	41 16		22 12*	10 3	9 2		1
Surg. ind., spontaneous Undelivered	B.	Oi	thers - -	-	41	<del>-</del>   1					1
Surg. ind., spontaneous Undelivered B.B.O	B.	Ot	thers - - -	-	41   16   17   —		12* —				
Surg. ind., spontaneous Undelivered B.B.O Forceps	B.		- - - - -	-	41   16   17   —	<del>-</del>   1	$\begin{bmatrix} 12^* \\ - \\ 2 \end{bmatrix}$				1
Surg. ind., spontaneous Undelivered B.B.O Forceps Surg. ind., forceps -			thers - - - - -	-	41   16   17   —	<del>-</del>   1	12* - 2 1				
Surg. ind., spontaneous Undelivered B.B.O Forceps Surg. ind., forceps - L.U.S., cæsarean section		Oi	- - - - - - -	-	41 16	<del>-</del>   1	$\begin{bmatrix} 12^* \\ - \\ 2 \end{bmatrix}$			1 - - -	
Surg. ind., spontaneous Undelivered B.B.O Forceps Surg. ind., forceps -			- - - - - - - -	- - - - -	41   16   17   —	<del>-</del>   1	12* - 2 1			1   	

Groups A and B (Total, 115).

Mode of Delivery.			Mot	her.	A.	Child.	D.	Pyrexia.	Sepsis.	Maternal Mortality per cent.	Still-birth rate per cent.
Spontaneous Surg. ind., spontaneous Undelivered	- - - - -	-	$ \begin{vmatrix} 61 \\ 25 \\ 20 \\ -4 \\ 1 \\ 1 \\ 113 \end{vmatrix} $		41* 19* - 4 1 1 - 66	12 4 — — — — 1	9 3	1     1	1      1		$ \begin{array}{c c}  & 19.3 \\  & 15.4 \\  & - \\  & - \\  & - \\  & 100.0 \\ \hline  & 17.9 \end{array} $

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A.—Cases under Ante-natal Supervision at Hospital Clinic.

		Remarks		Second stage delay.	Ext. acc. hæm.	Surg. ind. A.R.M.	Hyp. toxamia.		Surg. ind. A.R.M.	ř	Ext. acc. hæm.		Surg. ind. A.R.M.	)	Ext. acc. hæm.	Second stage delay.	A.R.M. in Jabour.			Ext. acc. hæm.		Brood Wet warion Cuna	A.R.M.	v.M.	Ext. acc. hæm.	
		Highest Blood Pressure	_	110/60	134/80	120/80 $120/70$		136/100	105/60	130/80	09/06	100/75	160/100	150/90	100/60	.	_	_	120/70	125/70		0//011	_	120/85	135/75	
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	; 	rirst Bleeding before Delivery.		2 days	S moodre		'		l week	sinoy c	1	9 hours		13 hours			$2  \mathrm{days}$	8 days	2 months			12 hours	o days		2 weeks	
	Result.	Ch.		A	<	4 4		¥	Ą.	A		4	A	K	1	A	A	A	A	<	4	A N	ATC!	Q	<	4
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		Condition on Admission.		Good	Good	Good	Good	Good	Good	Good	Good	good Good	Good	Good	Good	Good	Good	Good	Good	Good	Good	700g		Fair		7
	ats •\	Maturity JevileU	W M M	39	30	, xx		30	98	 50 50 50 50 50 50 50 50 50 50 50 50 50	1	37	39	40		40	40	တ္ဆ	 က က	<	40	404	2	35	140	H :
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		Age.		24	24	25	23	1	40	7.70	92	24	43	25	22		24	42.	2 23	99	100	0 0 0 0 0	1	40	×	
		Reg.		305	313	389	929	1736	690	804	0001	976	846	1023	$\int 1189$	1637	1249	1251	1302	1505	00007	1579	2011	1669	1905	2007

	Remarks		Surg. ind. A.R.M.	Ъ	F F F F F F F F F F F F F F F F F F F	Surg. ind. A.K.M.				Cardiae mitral.	Irreg. dismissal.	A.R.M. in labour.	Twins.			Face presentation. A.Lv.M. in labour.		Breech. Ext. version. Separa-					
	Hignest Blood Pressure		130/90	120/70		$\frac{130}{70}$	08/611	140/90		124/86	100/50	120/80	120/70			120/70	115/75	115/70	136/90	120/75	120/80	120/70	
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÷ ;	Bleeding before Delivery.		2 weeks	2 weeks	2 weeks	30 hours	;   	2 months	1	5 weeks		$11\frac{1}{2}$ hours	24 hours			2 days	5 days	10 hours	12 hours		6 hours	7 days	
ult.	Ch.				A	</td <td> </td> <td>A</td> <td>1</td> <td>A</td> <td>1</td> <td>SB</td> <td>A</td> <td>and</td> <td>A</td> <td>Ą</td> <td>A</td> <td>SB</td> <td>A</td> <td> </td> <td>A</td> <td>A</td> <td></td>		A	1	A	1	SB	A	and	A	Ą	A	SB	A		A	A	
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	Condition on Admission.		5000	Good	Good	Good	Good	Good	Good	Good	Good	Good	Good			Good	Good	Good	Good	Good	Good	Good	
3	VtirutsM VaevileU	wks	40	4	36	35	1	34	35	40	1	36	36			40	37	. 80	40		38	40	
uo uo	VirutsM SissimbA	wks	30	3 4 7	36	35	32	34	35	40	40	36	36			40	36	8 8	40	33	∞ •••	39	
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		Remarks	9		Surg. ind. A.R.M.	)	-	Surg. ind. A.K.M.	3		nd. A.R.M.	C.P.	Frevious L.C.S. section.	Irreg. dismissal.	)		Surg. ind. A.K.M. Transverse lie Fyt. version	A.R.M.	•			Previous L.U.S. section.	Sterilised.			Hyp. tox. Surg. ind. A.R.M.
	•	Hignest Blood Pressure		150/100	100/70		110/70	08/621		150/75	130/90	130/90	110/70	130/60	120/80	120/80	190/80		140/90	-	150/100	150/100	140/110		08/001	190/100
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	÷	Bleeding before Delivery.		9 hours			$\frac{2}{2}$ days	o days 13 hours			_	$9\frac{1}{2}$ hours	5 days	agyan n			2 days 2 days		$7  \mathrm{days}$	$3\frac{1}{2}$ hours	$11\frac{1}{2}$ hours	***************************************	4 weeks		L' hours	23 hours
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Remarks	Surg. ind. A.R.M. Thr. abortion. Manual removal of placenta. Surg. ind. A.R.M. Thr. miscarriage. A.R.M. in labour. Ext. acc. hæm. L.O.P. Manual rotation. Forceps. Surg. ind. A.R.M. C.P. D.C. 4½ ins.  C.P. D.C. 4½ ins.
Highest Blo.,d Pressure	$\begin{array}{c} 110/70 \\ 115/80 \\ 110/70 \\ 110/70 \\ 120/70 \\ 120/70 \\ 135/90 \\ 170/110 \\ 185/100 \\ 185/100 \\ 130/90 \\ 110/75 \\ 125/60 \\ 125/60 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 130/90 \\ 13$
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Pyrexia or Sepsis	
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	Remarks	Surg. ind. A.R.M. A.R.M. in labour. Blood	Hydrocephalus.	Acute pyelitis.	Surg. ind. A.R.M.			labour.	Surg. ind. A.R.M. Secondary P.P.H. Placental polypus.	Digital curettage. Irreg. dismissal.	Breech.	ourge mu		P.P.H. Retained placenta. Manual removal. Blood trans-	e under deaths. A.R.M. Transversion to ver	Recurrence of transverse lie. Bipolar podalic version.
	Highest Blood Pressure	$130/80 \\ 135/95$	$\frac{210/120}{130/90}$		$\frac{132}{100}$		$\frac{125}{120}$		120/70	100/60	100/60	130/95	140/90	1	130/75	
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	Condition on Admission.	Good Collapsed	Good	Poor	Fair	Good Good	Good	Good	Good	Good	Good	Good	Good	Collapsed	Good	
ats.	A Maturity S Delivery	37	33		40	37	%	40	40		36	3 5 5		40	36	
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	Remarks.	Surg. ind. A.R.M. A.R.M. in labour. A.R.M. in labour. A.R.M. in labour. Blood transfusion. Mild sepsis. Surg. ind. A.R.M. Surg. ind. A.R.M. Two blood transfusions. (See under deaths.) Surg. ind. A.R.M.	Surg. ind. A.R.M. R.O.P. Manual rotation. A.R.M. in labour. Syphilis. Surg. ind. A.R.M. Second stage delay.
	Highest Blood Pressure	$\begin{array}{c} 130/90 \\ 120/70 \\ 120/70 \\ 135/80 \\ 140/100 \\ 130/72 \\ 110/70 \\ 130/80 \\ 95/60 \\ 140/100 \\ 125/80 \\ 130/85 \\ \end{array}$	$\begin{array}{c} 150/102 \\ 150/100 \\ 150/90 \\ 135/100 \\ 125/85 \\ 120/80 \\ \end{array}$
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Result.	M.	444444444444A 444 4	444444
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	Condition on Admission.	Good Good Good Good Good Good Good Good	Good Good Good Good Good Good
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no.	s Maturity ( KinissimbA (2)	32 32 32 33 33 33 33 33 33 33	38 35 35 36 39
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	Reg. No.	2481 2516 2538 2624 2645 2645 2662 2689 2773 2773 2773 2862 2925 2925 2994 2994 3958 3309	3319 3383 3496 3498 3519 3545 3544

	Blood
Remarks	A.R.M. in labour. Disproportion. Cardiac Mitral. A.R.M. in labour. Second stage delay. Surg. ind. A.R.M. transfusion. Anencephaly. A.R.M. in labour. transfusion.
Highest Blood Pressure	140/100 90/40 120/70 130/96 134/96 120/78 118/70 140/70 138/90 140/85 112/70 125/80 125/80 130/85 130/85 138/90 140/85 130/88 135/95 140/80
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Age.	2   2   2   2   2   2   2   2   2   2
Reg.	$\begin{cases} 3568 \\ 4317 \\ 3576 \\ 3599 \\ 3619 \\ 3648 \\ 3648 \\ 3648 \\ 3688 \\ 3648 \\ 3648 \\ 3812 \\ 3882 \\ 3884 \\ 3812 \\ 3884 \\ 4138 \\ 4033 \\ 4069 \\ 4138 \\ 4069 \\ 4142 \\ 4142 \\ 4165 \\ 4138 \\ 4165 \\ 4138 \\ 4165 \\ 4138 \\ 4142 \\ 4142 \\ 4142 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 \\ 4144 $

#### 3.—MIXED AND CONCEALED ACCIDENTAL HAEMORRHAGE.

There were 59 cases of mixed and concealed hæmorrhage, of which 6 died (see Nos. 627, 1275, 3035, 3379, 3670 and 3755 under deaths). There were 39 still-births. Ten infants were born alive, of which 8 died later. There were 2 cases of puerperal pyrexia. Nine cases received blood transfusions—10 transfusions being given in all. In 14 cases the hæmorrhage was of the concealed type and in 45 cases of the mixed type.

A.—Cases under Ante-natal Supervision at Hospital Clinic (Total, 7)

Mode of Delivery.	Mother.  A D	Child.  A S.B. Died.	Miscarriage.  Pyrexia  Sepsis
Surg. ind., spontaneous Spontaneous	$\begin{array}{c c} 3 & - \\ 4 & - \\ \hline 7 & - \end{array}$	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	

### B.—Others (Total, 52).

Spontaneous		_	_	27	3	5	21	1		1	
	_	•	•		1	$\begin{vmatrix} 3 \\ 2 \end{vmatrix}$	11	5*	1	1	
Surg. ind., spontaneous	-	-	-	16	1		11	9	T	1	,
Surg. ind., forceps -	-	-	-	1	—	<u> </u>	1		—		
Perforation and forceps	-	~	-	1			1				
Undelivered	-	-	-		2		<del> </del> —				
Perforation and traction	-	-	-	1			1				
Totals	-	-	-	46	6	7	35	9	1	2	

^{*} Twins.

### Groups A and B (Total, 59).

Spontaneous 31 3 Surg. ind., spontaneous 19 1	8   22   4		8.8	64.4
Surg. ind., forceps 1 — - Perforation and forceps 1 — - Perforation and traction - 1 —	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		5·0 — 100·0 — 10·2	70·0 100·0 100·0 — 100·0 — 68·4

^{*} Twins, once.

ACCIDENTAL Hæmorrhage. Mixed and Concealed.

A.—Cases under Anti-natal Supervision at Hospital Clinic.

	t e	, ;
	Remarks.	Surg. ind. A.R.M.  Surg. ind. A.R.M. R.P. clot ¹ / ₄ 1b.  Surg. ind. A.R.M.  A.R.M. in labour.
	Highest Blood Pressure	$\begin{array}{c} 140/70 \\ 130/90 \\ 150/115 \\ 140/70 \\ 118/172 \\ 130/75 \\ 134/80 \end{array}$
eg. Iris	Percents Albuminu	<u>T</u>     ++
or	Sizəvyq Sepsis	
ìo	thgieW ₹	20 4 10 8 1- 8 421 L/324414 14
1	Bleeding before Delivery.	3 hours 6 hours 7 days 7 days
ilt.	Ch.	SB SB SB SB
Result	M.	4 44444
	Mode of Delivery	Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous -
e.	Concealed.	++
Type.	.bexiM	+ ++++11
	Condition on Admission.	Collapsed Good Good Good Fair Good Fair
at 	s Maturity	04 33 39 40 40 88 88
uo uo	girutsM & bissimbA &	35 38 38 40 40 88 88 88
	.vdinsa	H 9179 H 2
	Age.	36 22 22 36 39 39
	Reg. No.	70 117 662 1512 3389 3350 4084

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At C
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B

Blood transfusion. Surg. ind. A.R.M.	R.F. clot 1½ lbs. Hydramnios. Face. Anencephaly. Exomphalos. R.P. clot	$\frac{\pi}{4}$ 10.  R.P. clot $\frac{1}{2}$ 1b.  Breech. R.P. clot $1\frac{1}{2}$ 1bs.	Surg. ind. A.R.M. B.P. clot. 3 lb	Surg. ind. A.R.M. Surg. ind. A.R.M. R.P. clot 4 lb. Oral	sepsis.
146/100	125/90	$\frac{115/75}{120/60}$	100/80	$\frac{110}{60}$	
+	H	+		L'S L	
				- A	
л <u>С</u> ы.4	ත ත	6444	$3\frac{1}{2}$	で 点 点 点	
$SB \mid 27 \text{ hours}$		7 hours 17 hours	3 days	1 day —	
SB	SB	SB	SB	SB	
Y	F	AA	A	A	
Spontaneous -	Spontaneous -	Spontaneous - Spontaneous -	Spontaneous -	Forceps - Spontaneous -	
1	+	1 1	1	1 +	
+	ı	++	+	+ 1	
Shocked	Good	Fair Shocked	Fair	Fair Good	
36	36	34	56	37	
36	36	34	29	34	
4	ಣ	12	П	7	
30	27	42 22 22	31	28	
108	186	179	399	441	

										U	3													
	Remarks.	Surg. ind. A.R.M.	Blood transfusion.	Bilateral cortical necrosis of kidneys			R.P. clot 2 lbs.		•	Blood transfusion.	R.P. clot $\frac{1}{2}$ lb.	ı	under deaths.)	Two blood transfusions.		A.R.M. in labour.	Surg. ind. A.R.M. Blood transfusion	R.P. clot $2\frac{1}{2}$ lbs.	ı			Observation.	Surg ind A B M	R.P. clot \(\frac{3}{4}\) lb. A.R.M. in labour.
	Highest Blood Pressure	130/80	110/80		155/95	120/90	01/011	155/90	110/60	135/70	138/80	125/95	100/55	100/60	135/75	122/85	135/80	120/80	110/88	160/90		1	82/161	130/96
eiria	Percenta unimudIA	Tr.	++		24		+	-			Tr.	1		+++	+++	Tr.	භ <del> 4</del>		++	Tr.		1	+	-
OL	Pyrexia. Sepsis.		Ъ			1					1	1	1	,		-			-					
lo	or Weight ₹	ಲ್ಲ ಪ್ರಕ್ರಣ	4 7	ł	<b>ಬ</b> ಬ 4	∞ ° ∞	6. 6.	ಸಂ		64	9	01	10 84	-;+ 5	8	43		- ¢	61	· ∞			1	°¹ ∞
	Hust Bleeding before Delivery.	1 day			6 hours	l day	, ,	1	12 hours	22 hours	24 hours		1		8 hours	10 hours	20 hours	12 hours		5 days		]		17 hours
alt.	Ch.	S S S	SB		A	A C	SB	SB	<u> </u>	A	A	П	SB	X Z	$^{\mathrm{SB}}$	SB		SB	SB	$^{ m SB}$			W	SBS
Result.	M.	A 4	10		A	₫ <	4	A	A	A	A	A	Ω	A	A	A	A	A	A	A		∢ <	₹ <	Y Y
	Mode of Delivery	1	Spontaneous -	1	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Perforation and	Spontaneous -	Spontaneous	Spontaneous -	Spontaneous -	Perforation and	forceps			Spontaneous -
Type.	Concealed.	I					+	- +	-	1		+	+	+	l	1	1	ı	ı	1			-	 
Ty	Mixed.	+ -	++		+	+ -	+	1	+	+	+	1	f		+	+	+-	+	+	+		1	1	+
	Condition on Admission.	Shocked	Collapsed	1	Fair	Good	Shocked	Fair	Good	Fair	Good	Good	Collapsed	Collapsed	Good	Poor	Fair	Fair	Good	Good				Fair
ta.	A Maturity Surjectly Delivery	35	# % 20 53		59	940	. in a	. œ	32	34	36	30	35	ж ж	40	35	56	36	40	40		1	16	40
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	Age.	200	300		43	45	7 cc	29	20	34	25	25	23	37	28	39	32	31	37	33	(	02		34
	Reg. No.	493	627		650	651	765	911	11119	1145	1170	1243	1275	1667	1685	1689	1698	1928	2023	2143		2416	2904	2575

Remarks	R.P. clot 14 lbs. A.R.M. in labour. R.P. clot 11 lbs. (See under deaths.) Blood transfusion. Surg. ind. A.R.M. R.P. clot 9 ozs. Blood transfusion. Obstetric shock. (See under deaths.) Irreg. dismissal. (See under deaths.) Irreg. dismissal. (See under deaths.) Surg. ind. A.R.M. Eclampsia. A.R.M. in labour.
Highest Blood Pressure	140/80 125/85 110/70 130/90 140/98 125/80 185/130 130/85 150/90 146/90 146/90 122/70 200/120 130/80 128/80 120/90 130/80 130/80 130/80 130/80 130/80
Percentage AlbuminudiA	+ + + + + + + + + + + + + + + + + + +
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First Bleeding before Delivery.	1 day 1 day 12 hours 1 day 8 hours 7 days 7 hours 7 days
Result.	SB SB SB SB SB SB SB SB SB SB SB SB SB S
Res	AAA AAAAD AAAA AA ADADAAA AA
Mode of Delivery	Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous -
Concealed.	
Mixed.	+++ +++++++++++++++++++++++++++++++++++
Condition on Admission.	Good Fair Poor Poor Good Good Good Good Fair Fair Good Good Good Good Good Good Good Goo
Alaturity to Alaturity.	04 0 8 9 7 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
no yaturity on starion.	04 08 08 08 08 08 08 08 08 08 08 08 08 08
Parity.	
Age.	EEEE       4 2 2 2 2 2 4 4 2 2 2 2 4 4 2 2 2 2 2 4 4 2 2 2 2 2 2 4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Reg.	2762 2833 2844 2833 2844 2968 3005 3005 3035 3277 3277 3277 3277 3277 3277 3270 3712 3712 3712 3712 3712 3712 3712 3712

#### TOXÆMIA OF PREGNANCY.

During the year 1940 there were 779 cases of toxæmia of pregnancy. These cases have been divided into groups, viz.:—(1) Hypertensive toxæmia (excluding eclampsia and accidental hæmorrhage); (2) Eclampsia; (3) Hyperemesis; (4) Late vomiting

There were thus 626 cases in group (1); 46 in group (2); 82 in group (3); and 25 in group (4).

Of the 1,833 cases which had been under ante-natal supervision at the hospital clinic there were 369 toxæmic cases:—348 in group (1); 3 in group (2); 7 in group (3); and 11 in group (4).

Of the 2,521 other cases, 410 were toxæmic:—278 in group (1); 43 in group (2); 75 in group (3); and 14 in group (4).

There were 18 maternal deaths in a total of 779 toxæmic cases.

The incidence in the groups is shown in the following table:—

Table showing the Maternal Deaths occurring in the cases of Toxamia in each of the two Categories, A and B.

Type of Toxæmia.	Category A.	Category B.	Total Deaths.
1. Hypertensive toxæmia: Prims	1	3	4
Hypertensive toxæmia: Multips	1	1	2
2. Eclampsia	2	3	5
3. Hyperemesis gravidarum	_	4	4
4. Late vomiting	1	2	3
Totals	5	13	18

1.—Hypertensive Toxæmia (excluding Eclampsia and Accidental Hæemorrhage).

were in Category A and 348 in Category B; 541 infants were born alive and of these 47 died. There were 70 still-births and twins occurred in 31 cases. There were 6 maternal deaths, 2 in Category A and 4 in Category B. One case died of obstetric shock following manual delivery of a breech. One case of mitral stenosis collapsed after delivery and died. One case of miscarriage died under anæsthesia. One case of severe toxamia collapsed after delivery and died. One case of twins died of obstetric shock following There were 626 cases in this group, of which 337 were principaræ and 289 multiparæ; 278 cases delivery and one case died of pyelonephritis.

A.—Cases under Ante-natal Supervision at Hospital Clinic.

Under Symptoms the word EYE refers to Visual Disturbance and ABDOMEN to Epigastric Pain.

		Remarks.	Surg. ind. A.R.M.		Surg. ind. A.R.M.	Myocarditis. Sterilised.				Surg. ind. A.R.M.
-	ìo	Weight S. Child.	44	7	8	$0\frac{1}{4}$	73	ಲ್ಲ ಬ ಸ	74	9
_	10	Pyrexia. Sepsis.	a de la companya de l	1	1	1		1	1	Ъ
	<b>ц</b> э	Parts February 1,000	10	Tr.	H 07	-		+	1	1
	t eure	eefgiH eerd boold	176/114	140/90	154/90	160/90	150/90 $130/80$	130/100	160/100	165/120
	and Days.	*uəmobdA	ı	1	1	1	1 1	I		1.
	ms an in Da	Eye.	1	ı	ı	Î	1.1	ı	l	ı
	Symptoms and Duration in Day	Headache.	+6	3 + 8	3 + 2	1 1	1-1	ı	+ \	<u> </u>
	Sy	.smebeO	+ %	) 	+5	7 + 5	3 1 + 8	3+1	- + 6	+ 120
01:13		Alive, Still-b or Died.	A	A	A	A	A	O	A	Ą
1	Mother de.	eid to evifA	A	A	A	A	44	A	A	A
		Mode of Delivery.	Spontaneous -	Spontaneous -	Spontaneous -	Class cæs.	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -
	ъ. у	ktirutsM & Maturity	34	39	40	40	23 40	40	80	40
	no tinits §		32	38	40	37	21 40	40	37	36
		Parity.	22	Н	П	ಣ	-	-	62	
		Age.	35	22	26	39	22	24	33	27
		Reg No.	61	99	73	74	$\begin{cases} 89 \\ 1933 \end{cases}$	109	114	124

* When case is dismissed undelivered maturity refers to that on dismissal,

	Remarks.	Second stage delay.	y P.P.H.	polypus. Digital cureviage.	Urea clearance normal.	Obstetric shock. (See under	(d. A.R.M. Ext. version )	T.J.K. Surg. ind. A.K.M. Twins (1) R.O.P. Manual rotation. (2) Breech.	Surg. ind. Sep. of membranes.		Surg. ind. Sep. of membranes.	Cardiac mitral.	C.P. D.C. $4\frac{1}{8}$ ins.	
-	Weight of Shild.	<u></u>		7	<b>C</b>	63		4 <u>1</u> and	6 84 182	$6\frac{1}{4}$	$\infty$	7		
	Pyrexia or Sepsis.												i	
	Parts Esbach.	1			+     1		Tr.	<del></del> 4	H.	Tr.	+	Tr.		
əa	Highest Blood Pressur	140/85	2	160/110	$\begin{array}{c} 140/90 \\ 230/110 \\ 140/90 \\ 160/100 \end{array}$	160/90	$\frac{158}{90}$	155/100	170/110 $150/100$	140/90	150/100	140/90	165/120	
q	Abdomen, S.	l	1	1		1	1 1	1		1	l	1	1	
ms and	Eye.	1	1	1		1	+	ı	+	1	1	1		
Symptoms	Headache.	ı	1	1	1++1	ı	1 1	+1	! !	1		1	١,	_
Si Si	Oedema.	+5	77		1 +	- +8	87		1 + 5	$\frac{1}{1+1}$	+5	17 + 7	<u> </u>	
Child.	Alive, Still-borr or Died.	A		A	4   44	SB	AA	A	744	A	A	A	A	
Mother	Alive or Died.	A	A	A	4444	D	AA	A	AA	A	Ą	A	Ą	
	Mode of Delivery.	Forceps -	I	Cæs. section	Spontaneous - Undelivered - Spontaneous - Spontaneous -	Manual breech	Spontaneous - Forceps -	Forceps and Manual breech	Spontancous - Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	
. 1	A Maturity at Belivery.*	40		30	40 40 40	39	40	40	40 40	40	39	4.0	40	
	ao ytirutsM 😤	40		37	33 40 40 40	88	38	39	40	40	37	36	38	
	Parity.		1	_	- r - ss			·	2 -1	ಣ	0.7	63	Н	
	Age.	37		40	26 47 29 29	37	19	33	24 19	25	33	53	20	
	Reg. No.	[ 132	257	145	151 155 158 181	206	230	263	264 292	293	297	303	333	

	Remarks.	Observation.	C.P. D.C. 4 ins. C.P. D.C. $4\frac{1}{4}$ ins. Twins: V. and V.			Twins: V. and V.		Surg. ind. Surg. ind. A.R.M.	Twins (1) V. Second stage delay. Spina bifida. (2) V.	1.101.		
³o.	JugieWeight S. Weight S. Child.	&   C  C1	7 7 <u>1</u> 6 <u>1</u> and	0 27 64-162	1	$4\frac{1}{2}$	50 814-14	5. 6. 4.	10 10		12 8 814-101	7.4
JO.	sixəryq sisqə8		111									
Parts Esbach			111	- I	H c3	H4:		Tr.	+	1		Tr.
Highest Blood Pressure		$\frac{120/75}{160/110}$	140/90 $160/80$ $150/90$	140/90 $140/100$	145/90	140/90	150/100	$\begin{vmatrix} 150/95 \\ 210/120 \end{vmatrix}$	135/100	160/90	$\frac{150/100}{155/100}$	140/90
d ys.	Abdomen.			1 1	1	1		1 \	1	l	1 1	1
ns an in Da	Eye.	1 1	+	1 1	1	1	+ 64	1	+ 30	I		1
Symptoms and Duration in Days.	Headache.	1 1	1++	1 1	+		+ %	3 1 + 8	90 + 80	+ c	4   + %	2
Sy Dur	Oedema,	1 + 5	28 + 1 + 28	1 +6	+6	+	1		30	1	1 + 5	5
Child.	Alive, Still-b or Died.	A	A A and	AAA		.A	A	AA	$\begin{array}{c} D \\ \text{and} \\ A \end{array}$	<del> </del>	AA	A
er	eid ro svilA	AA	444	AA	A	A	A	44	A	A	AA	A
Mode of Delivery.		Undelivered - Spontaneous -	Spontaneous - Spontaneous - Spontaneous -	Spontaneous - Spontaneous -	Undelivered -	Spontaneous -	Spontaneous -	Spontaneous - Spontaneous -	Forceps and forceps	Undelivered -	Spontaneous - Spontaneous -	Class. cæs. section
4. V	A Maturity Briver	37	40 40 35	40	36	38	39	30 30 30	40	37	40	40
•uc <b>u</b> o	ytirutsM 🕏 bissimbA 🛣	33	40 40 35	36	35	36	37	38	40	36	39	39
	·Virity.	7	100					L 4	-	<u>~</u>		67
	Age.	e	27 21 26	18	31		20	21 39	28	25	22	26
	Reg No.	$\begin{cases} 379 \\ 1081 \end{cases}$	385 453 456	461	£ 540	125	553	560	571	L 607	975	643

Remarks,		Failed version.	Ext. acc. hæm. Second stage delay.	Surg. ind. A.R.M.					Phlebitis.	Urea clearance normal. Second stage delay.	Mitral stenosis. Twins: V. and V. (See under deaths.)	Irreg. dismissal.	
	Weight ∵ Child.	63	7 3	4	, o	$3\frac{1}{4}$		1	80	∞	$4\frac{1}{2}$ and	4   8	
.10	Pyrexia or Sepsia,								<u>-</u>				•
ch.	Parts Espach.		;		Tr.	12	<b>≓</b> ©			Tr.			Tr.
de Saure	Highest Blood Pressure		$\frac{170/105}{130/100}$	170/120	140/100	180/130	170/110	130/90	$\frac{150}{95}$	160/90 $120/80$ $150/120$	136/100	$\frac{180/110}{150/100}$	140/90
and Days.	Abdomen.	-			1	1	1	1	1 1	1 1 1	ı	1 1	
ms and in Day	Eye.	+5	1 1 1 1	+	I	+;	4	+ u	۱۱ د	1 1 1	+	1 1	1
Symptoms Duration in	Headache.	1		+ 81 +	- 1	+8	x	+ 1	-	11+	10 + 60	1-1	
Syn	Oedema.	+ c	9	+21+	- 12 +	8+8	% + £	3 + 1	- 1 1	1 1 1	+	1 + 5	17 + 1
	Alive, Still-b or Died.	¥	4	: A	A	D	A	1	A	A	A	0   A	A
Mother d.	Alive or Die	A	444	1 A	i A	A	A	A	AA	444	О	AA	4
	Mode of Delivery.		Undelivered - Spontaneous -	eous		Breech Spontaneous -	Spontaneous -	Undelivered -	Spontaneous - Undelivered -	Forceps -	Spontaneous -	Undelivered - Spontaneous -	Spontaneous -
*.ve	A Maturity at Belivery.*		28 39 40	38 27	40	32	37	88	40 24	31 40 25	88	27	40
uo uo	ytirutsM 🕏 bissimbA 🖫	36	26 39	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	40	30	36	38	40	30 40 42	& &	25 39	39
	Parity.		01   -	H 6	1 1-	Н		භ		က		ကတ	.23
	Age.	30	23   23	e e	5 24	25	29	26	128	32		21 38	29
	Reg No.	652	$\left\{ \begin{array}{c} 656 \\ 1736 \\ 701 \end{array} \right.$	710	737	795	797	829	$\begin{cases} 1086 \\ 848 \end{cases}$	$\begin{cases} 1469 \\ 2228 \\ 888 \end{cases}$	1883	917	896

	Remarks.		C.P. D.C. $3\frac{3}{4}$ ins. Previous			Surg. ind. A.R.M.	Surg. ind. A.R.M. Forceps	C.P. D.C. $3\frac{1}{2}$ ins. Repeat section. Sterilised.		C.P. D.C. 4 ins. Twins: V. and Br. Surg. ind. A.R.M.				
ìo	JdgisW Z	F- 50	54	5½ and	70 70 山4 山4	7 5 4 5	7	7		$\begin{array}{c} 6 \\ 4\frac{1}{2} \\ \text{and} \end{array}$	$3\frac{3}{4}$	62	9	187
or	Pyrexia or Sepsis.			1	1						. 1			
q:	Parts Esbach		_	Tr.	Tr.		-	+	e: 4-	Tr.		1	Tr.	Ti
t sure	tanfigiH erusserf boold		180/120	180/110	155/105	$\frac{155/105}{170/120}$	175/100	170/110	170/100 170/110	140/80	140/90	160/100	170/110	155/80 155/100
and Days.	Abdomen.	1 1	1	l	1	1	1	+	1 1	1 1	1	1		.1 1
	Eye.	1 1	1	1	I	+	1	ı	1 1	1 +8	3 1	ţ	. 1 1	+
Symptoms Duration in	Headache.	+-	<b>→</b>	ı	+ c	4	1	1	1 1	1 + 2	1+	-	1 1	1+
	Oedema.	1 +-	- + ;	14 + 120	I	+1	- 1	1	1 1	1 1	+	+-	#	1 1
	Alive, Still-bo	AA	A	A and	AA	AA	SB	A	1 1	A D	D	A	A	IA
Mother	Alive or Diec	AA	A	A	A	AA	A	A	AA	AA	A	A	A A	AA
	Mode of Delivery.	Spontaneous - Spontaneous -	Cæs. section	(L.U.S.) Spontaneous -	Spontaneous -	Spontaneous - Spontaneous -	Manual breech	Cæs. section	Undelivered - Undelivered -	Spontaneous - Spontaneous -	Spontaneous -	Spontaneous -	Undelivered - Spontaneous -	Undelivered - Spontaneous -
ås, ∗.,	A Maturity Belivery	40	40	38	37	40	37	40	29	40	40	38	38	34 40
uo uv	ViruitsM 🕏	40	38	33	37	38 34	36	40	27	36	40	38	36	38
	Parity.		4	-	œ		6.1	23	-	61	_	70	-	ا ي
	Age.	27 24	31	34	31	18	31	35	29	35	23	33	25	24
	Reg No.	982	1025	1026	1053	1058	1103	1106	$\begin{cases} 1112\\1770 \end{cases}$	$\binom{2134}{1158}$	1169	1176	$\begin{cases} 1186 \\ 1779 \end{cases}$	$\begin{cases} 1201 \\ 1725 \end{cases}$

		Remarks.	C.P. D.C. $4\frac{1}{4}$ ins. P.O.P. Manual rotation	C.P. D.C. $3\frac{1}{2}$ ins.	Surg. ind. A.R.M. O.P. Manual rotation.	Cardiae aortie.		Breech. Ext. version. R.O.P. Manual rotation.	C.P. D.C. $3\frac{7}{8}$ ins.	Surg. ind. A.R.M.		Twins. (1) Breech. Forceps to a.c. head. (2) Vertex.			
	lo	Neight is Weight in in in in in in in in in in in in in	∞ ∞ 4	51	- T- - T- - T- - T- - T- - T- - T- - T-	E 4	91 61 62	7-1-1	1	71	84	$6\frac{3}{4}$ and		10 C	
	or .	sixəry SisqəS			1 1	1	11				I	1	1		
	'cp'	Parts Esba	1	ಣ		63	93 1	Tr.		Tr.				H 2V	
Э	anss 4s	hafigiH arff boold	150/100	160/110	$\frac{170/110}{140/90}$	155/100	200/90 $150/100$	$\frac{115}{60}$	155/85 $135/80$	170/100 $150/90$	140/100	154/100	150/100	$\frac{172/105}{145/95}$	
70	Lys.	Abdomen.	1	1		1	1 1	LI		1 1	1	ı	1	1 1	
ms an	in Da	Eye.	1	1	1 1	1	1+	1+0	4	1 1	+ =	‡	+c	++	
vinnto	Duration in Days.	Неядасре.	+ t	- + 8	3 1 +8	8 + 2	4 + +	1+1	-	1 1	+ ]	+ 1	+ 6	01	
	Da	Oedema.	+ 5	1 + 5	311	+ \$	3++5	3++	-	1 + 8	20 +	+ 28	+ c	0	
Child.	naoo	Alive, Still-l or Died.	A	A	AA	A	D	A	A	A	A	A	DA	A A	
Mother	•pe	Alive or Dic	A	A	AA	A	AA	A.	AA	AA	A	A	A	44	
		Mode of Delivery.	Forceps	Cæs. section	(classical) Spontaneous - Forceps -	Spontaneous -	Forceps - Spontaneous -	Undelivered - Forceps -	Undelivered - Cæs. section	(classical) Spontaneous - Undelivered -	Spontaneous -	Manual breech and forceps	Spontaneous -	Spontaneous - Spontaneous -	
	3. v. v.	≷ Maturity E Deliver	40	39	40	40	40	38	38	40	40	40	40	40	
	·uo uo	YdirutsM \(\frac{\beta}{\infty}\) sissimbA \(\frac{\beta}{\infty}\)	40	38	39 40	39	40	38	38	38	40	37	40	40	
		Tarity .		H	<b>_</b>		101	-		e 9		-	6.1	4-1	
		Age.	20	28	19 35	28	20	28	36	23		28	25	25 35	
		Reg. No.	1339	1355	1373	1384	1439	$\begin{cases} 1493 \\ 1655 \end{cases}$	$\begin{cases} 1495 \\ 1680 \end{cases}$	1509 $(1513)$	$\begin{cases} 1826 \end{cases}$	1541	1546	1548 1555	

Remarks.		C.P. D.C. 4 ins.	Surg. ind. A.R.M.		Second stage delay. C.P. D.C. 4 ins. Manual removal	of placenta. Surg. ind. A.R.M.		Cardiac auricular fibrillation.	stage delay.	Pyelitis.	Previous section.	Mastitis.	Twins: V. and V.
Weight of Child.	$6\frac{1}{2}$	& 8 4	41	10 10	4 6,4		1	63	<u> </u>	1	61	61 534 14	54 and 64
Pyrexia or Sepsis.		1						A.			02	12	
Parts Esbach.		F	31		1				Tr.	-	Tr.	22	C
Highest Blood Pressure	140/110	140/90	190/140	160/100	165/110	160/105	155/100	160/110	$\frac{170}{165}$	115/95	146/102	170/100	170/105
Abdomen.	1	1	1		ı	. 1	1	1	1 1	-	1 1	1 1	
Eye.	1	1+	~		1	ı	-	1		1		11.	+
Dedema. Duration in shadache.	+ 5	120	+ 5	2	ı	.	+ t	~	+	+ [	-	+ ¢	2+09
Oedema. Dugg	+	+ [	+ + 5	2   1	+21	+		ı	1 + 6	120		1 1	+ 51
Alive, Still-born gi	A	A	A	Ą.	A	A	A	A	44		F	AA	A and A
Alive or Died.	A	A	A	₹ 4	1 4	A	A	A	4 A	A	AA	44	A
Mode of Delivery.	Spontaneous -	Cas. section	Spontaneous -	Spontaneous -		Spontancous -	Spontaneous -	Forceps -	Spontaneous - Spontaneous -	Undelivered -	Cas. section	(classical) Spontaneous - Spontaneous -	Spontaneous -
* Maturity at Melivery.*	40	40	34	40	38	40	40	40	39	17	38	40	40
Alaturity on Smith sion.	40	36	33	40 35	38	35	40	40	338	<u>ب</u>	36	40	36
Parity.	4	63		-	+	_		70		21		0110	
Age.	29	30	29	24	6	29	27	40	26	25		26 35	58
Reg. No.	1566	1572	1596	1640	$\begin{cases} 1829 \\ 1829 \end{cases}$	1804	1849	1851	1862 1873	(1882	$\left\langle \begin{array}{c} 3593 \\ 3847 \end{array} \right.$	$1904 \\ 1926$	1938

Remarks.	Asthma and bronchitis.	Surg. ind. A.R.M.	Surg. ind. A.R.M. C.P.	Rigid cervix. Manual dilation. R.O.P. Manual rotation.		Surg. ind. A.R.M. Surg. ind. Sep. of membranes.	Phlebitis.	Surg. ind. A.R.M.			Surg. ind. A.R.M.	C.P. D.C. 3\(\frac{5}{8}\) ins.
of theight of Child.	7C 8 14-14	4 -	$6\frac{1}{4}$	$\infty$		6	8	C 9	<u></u>	712	$6\frac{1}{4}$	51
Pyrexia or Sepsis.												.
Parts Esbach.	_hs		— c1			HHH.	1	E 4	Tr.		⊢¦¢4	+
Highest Blood Pressure	170/124 160/100 150/90	130/90 $140/90$	$\frac{140/90}{150/108}$	140/85	08/621	$\frac{120/90}{150/106}$ $\frac{140/85}{140/85}$	145/105	$\frac{180/90}{170/85}$	150/95	150/90	170/110	160/110
Abdomen.	1 1 1	1 1		I	1	1 1 1	,	1 1	1	1	+ 7	
Eye. By		1 1		ı	I		ı			+ 1	-	
Symptoms and Headache.  Headache.  Eye.  Hye.	+ 1~	1 1	1 + 8	3 1	1		+5	17	+ &	3+1	-	
Oedema.	+++	++2	# 1 + 8	3+1-	+ 5	3+++\$	है ।	1 + 8	3+5	3+1	-	+ 9
Alive, Still-born	AK	A A	AA	SS		AA	A	AA	А	A	A	A
Alive or Died.	444	A A	AA	A	A	444	K	A	A	Ą	A	4
Mode of Delivery.	Spontaneous - Spontaneous - Undelivered -	Spontaneous - Spontaneous -	Spontaneous - L.U.S. section	Forceps -	Undelivered -	Spontaneous - Undelivered - Spontaneous -	Spontaneous -	Spontaneous - Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Cæs. section (L.U.S.)
de Vaturity at	39 40 28	38	40	40	ත භ	40 40 40	40	40	40	40	40	40
no ydrutha 🖁 🖁 Admission.	37 40 20	33.4	40	40	17 co	40 40 37	40	38	40	37	40	40
Parity.				·	_	100	9	4-	က	r-i	<b>ে</b> 1	-
Age.	62.4 63.9 63.4	1 55	19 35	42	 82 	20 43	53	26 23	က	21	33	18
Reg No.	1947 1980 1986	2825 2031	2060	2164	2636	$\begin{cases} 3003 \\ 2181 \\ 2206 \end{cases}$	2227	2271 2293	2296	2302	2309	2327

Remarks.			Surg. ind. A.R.M.	Breech. Spontaneous version.		Breech. Ext. version.			Second stage delay.	Surg. ind. A.R.M.		R.O.P. Manual rotation.	Wassermann positive. Surg. ind. A.R.M.	Surg. ind. A.R.M.	Breech. Ext. version.	
Meight of Child.	lbs.	10 10 10 10 10 10 10 10 10 10 10 10 10 1	$6\frac{1}{2}$	[	0 4 4	1 10	را اجان	6146	8 8/4	6/4 6/4	9	E 4	6 5 2 2 2	31	73	
Pyrexia or Sepsis.									1		-					
Parts Espach.	1,000	41	52					Tr.		+	Tr.	ļ	Tr.	ĭΟ		
Highest lood Pressure	H .	200/120	145/90	145/95	$\frac{150}{100}$	145/95		$\frac{140}{85}$	140/80	152/82	140/90	150/90	156/100 $150/100$	190/120	150/95	
and Days.	V		ı	I	1 1	1		i I		1	1	1		ı	1 1	
		1	+5	<u> </u>		1		+	4 1	- 1	1	I	1 1	+6	° .1 1	
Symptoms, Duration in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particular in particul	H	l	+5	¦ + -	+	l i	+,	<u> </u>	+	+ 1	- + 5		c   +5	14 + 6	07	
edema.		+ 000	3+4		1 (	+ -	ŀ + <u>;</u>	# 1 1	+ 5	27 +	+5	12	1 1	+6	07	
ive or Died, bill-born or Or Died, cor Died, c	IV _	$^{\mathrm{SB}}$	A	=	A		1 🔻	A 4.	A	A	A	A	A A	$_{ m SB}$	A	
ive or Died.	[V   _	A	A	4	44	₩ <	t A	44	A	A	A	A	AA	A	44	
Mode of Delivery.		Spontaneous -	Spontaneous -		.0. 20	Undelivered -	Spontaneous -	Spontaneous - Spontaneous -	Forceps -	Spontaneous -	Spontaneous -	Forceps -	Spontaneous - Spontaneous -	Spontaneous -	Undelivered - Spontaneous -	
Maturity at Delivery.*	wks	32	39	37	00 40	ي ان ح	40	36	40	40	39	37	39	28	36	
mo yirity on and and and and and and and and and an	wks	28	33	37	30	 	40	36	36	40	39	37	38	0.7	36	
Parity.		П	P=-1	-		_	က		ı	-	-	6.1	- 22	Ç1	-	
Age.		23	23	37	21	22	25	32	29	27	7.2	37	38 53	35	23	
Reg. No.		2336	2386	2457	2471	$\begin{cases} 2517 \\ 9630 \end{cases}$	2519	$2530 \\ 2546$	2610	2611	2615	2623	2573 2578	2659	$\begin{cases} 2673 \\ 3080 \end{cases}$	

Remarks.	Observation. C.P. D.C. 4 ins. Pyrexia urinary.	Transverse. Ext. version. Surg. ind. A.R.M.			Breech. Ext version.	Surg. ind. A.R.M. Breech. Ext. version.		Prol. cord. Surg. ind. A.R.M. Second stage delay.	Surg. ind. Sep. membranes.		
Weight of S. Child.		15 L	8 2 7	$5\frac{1}{4}$		63	4 8 15	8 9 9 8 -k1::::::::::::::::::::::::::::::::::::	$6\frac{1}{2}$	1	7
Pyrexia or Sepsis.	1 24	!								1	1
Parts Esbach			1	$\frac{2}{2}$	İ		i i		1		Tr.
Highest essure	140/85 $140/90$	160/85 $130/100$	146/86	160/120	130/80	$\begin{array}{c} 155/100 \\ 125/80 \\ 154/100 \end{array}$	180/130 $140/90$	$140/90 \\ 160/100 \\ 140/100$	140/100	180/100	200/130
Abdomen.	1 1		l	I	•	1 1 1		1 1 1 1	1	1	
Eye. in Days.	1 1	1 1	I	1	I			i 1 1 1	1	+ 0	÷ +
Dedema. Dedema. Dedema. Headache. in in in in in in in in in in in in in		1 1	+ 8	× + c	07	[ ] ]	+99 1	1	1	+-	,
Oedema. Dag	1+4	1 +	r + 8	$\frac{27}{20} + \frac{2}{9}$	0 + 5	7 + 1 +	i +;	7 + 1   +	<del>1</del> +	+	+
Alive, Still-born gind or Died.	- A	A A	A	Ą		A   A	C A	ব্ধব্ধ	A		&B
Alive or Died.	A A	A A	A	A	A	444	A A	4444	Y.	Ą	A
Mode of Delivery.	Undelivered - Cæs. section	Manual breech Spontaneous -	Spontaneous -	Spiontaneous -	Undelivered -		Spontaneous - Spontaneous -	Forceps - Spontaneous - Spontaneous - Forceps	Spontaneous -	Undelivered -	Spontaneous -
* Maturity at Selivery.*	35	32	40	4.0	37	3.9 4.0	37	04 04 04 06 06 08	39	34	40
no virutsM \$	35	30	40	40	37	38 34 40	33 36	40 39 38	39	32	37
Parity.	4	17	-		67		p-101	∞ <del>-</del> 4 -	П		
Age	04	74 6	25	1.9	22	55	25	25 24 27 25 27	40	38	1
Res No.	2674	2685	2717	2718	(2724	$\begin{cases} 2905 \\ 2744 \\ 3373 \end{cases}$	2768	$\begin{array}{c} 2780 \\ 2802 \\ 2813 \\ 2821 \end{array}$	2836	$\int 2839$	(3197

		Remarks,	Pyelitis (mild).	Cardiac. (1) Breech. (2) Vertex.		Twins: V. and V. Lobar pneumonia. (See under deaths.)	Bronchitis.	Surg. ind. A.R.M.	Second stage delay.		Surg. ind. A.R.M. Second	Surg. ind. Sep. membranes.	C.P. D.C. 4 ins.	Surg. ind. A.R.M.		
	lo	Weight ∴ Child.	∞		F_ €0 44	6 and	⊕	$6\frac{1}{4}$	9		72	63	-\sqrt{2}	61	⊕ & & 41– 131	
	JO.	Pyrexia Sepsis				1	1									
!	cp.	Parts Esba		121	<b>⊣</b> [04	+ +			Tr.			Tr.		Tr.		
	st saure	eargiH eard boold	$\frac{170}{140}$	160/80	160/100	150/90	130/80	180/110	150/100	150/90	180/100	180/120	06/091	175/110	$\frac{140/90}{160/110}$	144/90
	and Days.	Abdomen.	1 1	1	ı	Ι.	1	[		I		1	1	1		
		Eye.		ı	1	1	I		1	+ 1	I	+1~	-	1	1 ,1	+1
	Symptoms Duration in	Headache,	1 1	ı		1			1	+ 7	1	+ 1	-	+ =	#	+1-
	Sy	Oedema.	1 + 8	3 +	1+	120	+5	Q+ 1		+ 7		+	+1	-	1+1	-
	Mother Child.	Alive, Still-L or Died.	A	Dand	A	and	4	A	V	1	A	¥,	Ą	Ą.́	AA	
	Mother bd.	oid to syilA	. AA	A	A	Д	A	A	14	A	A	A	Ą	A	AA	A
		Mode of Delivery.	Spontaneous - Undelivered -	Manual breech and spont.	Spontaneous -	Spontaneous -	Undelivered -	Spontaneous -		Undelivered -	Forceps -	Spontaneous -	Cæs. section	Spontaneous -	Spontaneous - Spontaneous -	Undelivered -
	35. V.*	R Maturity R Maturity	40 433	36	40	36	30	38	40	က္	33	40	40	37	40	25
	•uo <b>u</b> o	KtirutsM 😤 SissimbA 🛱	30	35	37	36	26	00 co	40	32	% %	38	& &	35	40	24
		Vdirsq	$\vdash$		ಣ	લા	ರಾ	-	٦		-	93	<u> </u>	9	8	
		Age.	26		36	20	35	2	0.7	18	26	25	25	42	29 43	20
		Reg No.	2846	3228	2856	2884	2918	3715	$\begin{cases} 292.9 \\ 3054 \end{cases}$	_ 2933	2938	2943	2950	2958	2973 2986	2988

Remarks.	C.P. D.C. 4½ ins.  Surg. ind. A.R.M.  Second stage delay.  Surg. ind. A.R.M.	C.P. D.C. 44 ins. Surg. ind. A.R.M. Second stage delay. Cardiac. Mitral and aortic. Surg. ind. A.R.M. Shoulder presentation. Int. podalic version. Debility.	Prol. cord replaced. Irreg. dismissal.  R.O.P. Manual rotation.  Pyrexia. P.U.O.  Hydramnios. Twins. (1) Shoulder. Int. podalic version (2) Vertex.
of Weight of Spild.	トレ     Lレ で XC X 24     L 14 14 14 14 14 14 14 14 14 14 14 14 14	2   L	64 7 74 and 64
Pyrexia or Sepsis.			A
Parts Esbach	[년 년 - +   1	H   H	
Highest Blood Pressure	150/100 140/95 160/100 160/110 140/100 146/90 140/100	$\begin{array}{c} 150/60 \\ 150/60 \\ 160/100 \\ 160/70 \\ 166/106 \\ 136/70 \\ 150/80 \end{array}$	160/100 146/100 150/90
Abdomen.			
Eye. in Da			+ 00
Symptoms and Duration in Days.  Headache. Eye.	+ 9 +     + 9	+ \alpha   +	+-08
Oedema, Day	1     + \overline{6}   + \overline{7} +	+     +	-+4+ 1
Alive, Still-born	44 4 44 44	N	A SB and A
Alive or Died.	444 44 44 44	TAA AA A AA	A A A
Mode of Delivery.	Spontaneous - Spontaneous - Undelivered - Undelivered - Forceps - Spontaneous - Spontaneous -		Spontaneous - Forceps Manual breech and spont.
A Maturity at Delivery.*	39 39 40 40 40 40 40 40 40	_	3.9
no virutski s moissimbA &	38 40 40 40 40 40 40	35 36 37 37 36 36 37 40 40	36 40 37
Parity.	অঅফে ( ভ অব ন-		9 1 4
Age.	27 24 31 23 24 31 10	26   26   31   38	29
Reg No.	$ \begin{array}{c} 2991 \\ 2998 \\ 2998 \\ 3016 \\ 3020 \\ 3021 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3036 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3037 \\ 3$	$\begin{cases} 3037 \\ 3045 \\ 3535 \\ 4130 \\ 3062 \\ 3363 \\ 3363 \\ 3363 \\ \end{cases}$	3087 3137 3140

Remarks.		C.P. D.C. $4\frac{1}{4}$ ins. Surg. ind.	A.R.M. in labour. Surg. ind. A.R.M.	Scoliosis. Anencephalic.			Surg. ind. A.R.M. Phlebitis. Second stage delay.	Second stage delay. Second stage delay. I.U.D.	Surg. ind. A.R.M.	P.U.O. Second stage delay.	Surg. ind. A.R.M.	
ght of hild.		<b>∞</b>	<b>√</b> ∞ c	0	9114	17	10   0 0   0	61214	$6\frac{1}{4}$	71	9	
ro sixe	Pyro Se						4	1		۵.		
gapsch.	Parts per 1,000	II.	-	++	Tr.	] L.		, <u> </u>	Tr.	Tr.	-14	
ghest Pressure	Blood	140/110	140/90 $170/120$	$\frac{140}{140}$	155/100 $150/90$ $150/90$	140/100 $140/100$	170/100 $170/110$ $140/90$	$\frac{140}{90}$ $\frac{185}{110}$	140/100	$\frac{160}{145}$	$\begin{array}{c} 170/120 \\ 170/120 \\ 170/110 \\ 140/100 \end{array}$	
	mopqv	1	1 1		1 1 1.	1 1	1 1 1	1 1	-	1 1	1111	
	Eye.	I	+		1 1 1	1 1	+ +	-	I	1 1		
Symptoms Duration in	Headac	1	+		1 1	+ 1	+	-   + -	1.4	+		
Da. Da.	Oeden	+ &	3   +	+ +	1   + 5	17	111	1 + 7	+ + -	++-	-	
- [음]nrod-Ilit	S ,evilA or I	A	444	SB	A A	AA	SB A	A	A	DA		
Mother Speed.	to evilA	A	444	444	AAA	AA	AAA	AA	A	A A	4444	
Mode of Delivery.		Spontaneous -	Spontaneous - Spontaneous -	70	Spontaneous - Spontaneous - Spontaneous -	Spontaneous - Spontaneous -	Spontaneous - Spontaneous - Forceps -	Forceps - Forceps	Spontaneous -	Spontaneous - Forceps -	Undelivered - Undelivered - Miscarriage - Spontaneous -	
urity at hivery.*	A Matr	38	40	ည္ လ	65 40 40 40	40	ಬ ಬ ಬ ಬ ಬ ಬ ಬ	40	40	40	23 26 27 39	
no ytiri ission.	ntsM ×	35	40		25 40 40	40	20 0 20 0 30 0	40	39	40	25 25 39 39	
rrity.	Fa I	-	- 10		-   -	ಣ –	μюн		-		2     -	
Age.		24	 	31   31	25	35	20 20 20 20	32	24	21 20	34	
Reg.		3141	3149	3555	$\begin{cases} 3175 \\ 3675 \\ 3193 \end{cases}$	3196 3209	3235 3246 3272	3274 3287	3298	3306	3337 3732 3833 3338	

	Remarks.	Breech. Ext. version.		C.P. D.C. $4\frac{1}{4}$ ins.	Surg. ind. A.R.M.	Breech. Ext. version.			Surg. ind. A.R.M. Second	Surg. ind. A.R.M. Second	Surg. ind. A.R.M. Surg. ind. A.R.M.		Cardiac mitral. Surg. ind. A.R.M.
J	Weight of Whild,	1 00	19	9	70 0 142 2014	0 70	10 ∞ 10 山に		14m4 6	Ξ	だ 50 50 50 50 50 50 50 50 50 50	91	747
J.	o Syrexia o Sepsis.		1					1					
т.	Parts Esbach	+			Tr.	4	<u> </u>	1	Tr.		31	<b>c</b> 1	
ean	tsəfiH poold boold	$\frac{150/90}{140/80}$	160/100	011/021	$\frac{180}{160}$	$\frac{140/100}{150/105}$	$\frac{150/100}{150/110}$ $\frac{180/130}{180/130}$	150/100	$\frac{135}{150}$	140/110	$\frac{160/100}{140/110}$	140/100	155/110
and	* raemobdA	1 1	1	I	1 1	1 1	1 1 1	1	11	1	1.1	1	
ms and in Day	Eye.	1 1	ı	+		1+1	-     + 8	2 + 2	<u>+</u>   + r	-+1	-   +		1
Symptoms Duration in	Headache.	1 1	+1	+	1 1	1 1	1 1 + 8	3 + 2	# + + r	-+1	-	+	+
SS	Oedema,	1+1	-+1	- + S	2 + + 1	1 + 5	2     +8	2 + 2	# 1 + 6	2 + 1	-   +	<u>+</u> +	- + <del>1</del> 1
	Alive, Still-bo	A	A	A	D	AA	A A SB		AA	A	A	A	A
Mother	Alive or Died	AA	A	A	AA	AA	AAA	A	AA	A	AA	Ą	A
	Mode of Delivery.	Undelivered - Spontaneous -	Spontaneous -	Cæs. section	Spontaneous - Spontaneous -	Spontaneous - Spontaneous -	Spontaneous - Spontaneous - Spontaneous -	Undelivered -	Spontaneous - Forceps -	Forceps -	Spontaneous - Spontaneous -	Spontaneous -	Spontaneous -
**	s ttirutsM 🕏 . Waturity.	37 40	40	40	36	40	38 40 36	38	40	40	40	40	39
u(	o ytirutsM 🕏 roissimbA 🛱	37	36	39	30	40	38 40 30	37	40	40	333	37	37
	Parity.	-	H	_	<u> </u>	ന <u>⊢</u>	H H 4	<del></del> 1	-	67		ಣ	7
	Age.	22	22	21	25	20	24 19 40	21	20	23	20	22	35
	Reg. No.	$\begin{cases} 3364 \\ 3622 \end{cases}$	3377	3384	3393 3394	3403 3414	3441 3471 3472	$\int 3479$	3656	3477	3484 3501	3536	3575

Remarks.			P.U.O. Twins. (1) V. (2) V.		Surg. ind. A.R.M. I.U.D. Surg. ind. A.R.M.	Second stage delay. L.O.P. Manual rotation.	Surg. ind. A.R.M. Second	Late vomiting.			L.O.P. Manual rotation.	Breast abscess.	C.P. D.C. 4½ ins. Surg. ind. A.R.M.
Veight of Child.	1 jos	63	77	and 5	10 ×	- 101-161 - 101-161	7		$5\frac{1}{4}$ and	4 ∞	17	ट हान्स	∞ ∞
yrexia or Sepsis.	d		1 04					1					
Espach.	Parts per 1,000	Tr.	37		Tr.					-	T.		Tr.
Highest d Pressure	BJoo	150/110	$\begin{array}{c} 145/110 \\ 140/100 \\ 170/130 \end{array}$		$\frac{140/90}{150/90}$	$\frac{130/110}{145/95}$	160/100	150/100	140/100	140/95	$\begin{array}{c c} 145/90 \\ 145/100 \\ 160/110 \end{array}$	140/90	160/100 $140/90$
men.	obdA	I	1 1 1		1 1	1 1	-	1	١.	1	1 1		1 1
as and in Days.	EZ	-					1	+6	<u> </u>	+-	<b>⊣</b>		1
Symptoms Duration in ache.	Head	+	+		+	+ 1	ĺ	+ 5	7	+	1 1		+
ema. Day	Oed	+ &	3     +			1 + 8	0 + r	+6	1, 1	+	1 1	1 + 2	# + 1
Still-born Bied.	,9vilA vo	A	444	and A	SB	AA	A		A and	A	A A	Y	AA
or Died. Still-born Died. Died.	Alive	A	444		A A	AA	A	A	A	A	44	ų V.	A A
Mode of Delivery.		Spontaneous -	Spontaneous - Spontaneous - Spontaneous -	4	Spontaneous - Cæs. section	(L.U.S.) Forceps Forceps	Forceps -	Undelivered -	Spontaneous -	Spontaneous -	Forceps - Spontaneous -	Forceps -	Spontaneous - Spontaneous -
turity at elivery.*	aM ≱ I × X	40	40 40 36		39	39	40	37	40	40	40	30	40
turity on		40	38 40 35		39	38 38	40	36	40	40	40	30	38
Parity.		-	100		ж н		7-1	ಣ	1	4	0101-	-	က ကျ
Age.		23	24 29 24		32 20	32	26	27		34	34	8	24
Reg No.		3607	3639 3644 3654		3689 3694	3711 3713	3718	∫3731	4116	3734	3738	3937	3775

		Remarks.		Surg. ind. A.R.M.	Second stage delay.		Surg. ind. A.R.M. Prol. arm.	Surg. ind. A.R.M.				Surg. ind. A.R.M.	Surg. ind. A.R.M.
		Weight Spild,		64	C & & C   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A -   A	9	63	- L		7	8	L C C	で の の は は は は に に に に に に に に に に に に に
	10	sixəry Sepsis	-										
	cp	Parts per 1,000	Tr.	Tr.	<u> </u>			Tr.		1	Hr.	61	16
Э	ds Tuss	Highes	150/80	$\frac{145}{90}$	$\frac{120/80}{140/100}$ $\frac{170/100}{170/100}$	150/90	1.66/100	$\frac{130}{160} \frac{105}{120}$	180/120	140/100	150/110	$\begin{array}{c} 150/110 \\ 170/110 \\ 150/96 \\ 150/90 \end{array}$	150/100 $220/120$
	ys.	Abdomen.	1	1 1	1 1 1	1	1	1	1	1	I	1   1	
ns and	in Days.	Eye.	+- 8	$\frac{1}{2}$	-+	1	I	+ 1	·	1	+	1+1+8	06
motor	Duration in	Headache.	+8	$\frac{5}{8}$ + 1	+9	24	1	1 + 5	120 + 5	120	+ 5	02+     + 5	9
y y	Dur	Oedema,	+8	x + 1	-+1+9	7-1	1	1 + 5	120	+ 1	- + ¢	07 + + 1 1	1 + 5
Child.	trtoc	Alive, Still-loor Died.		A	A A A	A	Ą	A A	1	A	А	444	PA
Mother	.be	Alive or Did	A	A &	AAA	A	A	A	A	A	A	4444	AA
		Mode of Delivery.	Undelivered -	Spontaneous - Undelivered -	Forceps - Spontaneous - Spontaneous -	Spontaneous -	Forceps -	Spontaneous - Spontaneous -	Undelivered -	Spontaneous -	Spontaneous -	Spontaneous - Spontaneous - Spontaneous - Undelivered -	Spontaneous - Spontaneous -
	y at	A Maturity Beliver	38	40	40 40 40	40	89 71	40	26	40	% %	40 40 39 39	32
	·uo uo	ytinutsM 🙎	36	80 m	40 40 40	33	34	39 40	21	40	36	36 40 39 38	35
	•,	Parity	$\infty$	ന —'	-120	-	_	<b>⊢ ೧</b> ೧	1-	4	1~	୦୯୯୯	-=
		Age.	41	25 24	32	21	50	222	34	39	39	4289	19
		Reg No.	3785	3787	4251 3791 3794	3783	3795	3834 3849	3855	3863	3866	3867 3868 3910 3911	3915 3920

	Remarks.	Second stage delay. Irreg. dismissal.	Irreg. dismissal.	C.F. D.C. $4\frac{1}{8}$ ms.	Breast abscess.		GP DC 44 ins	Phlebitis.	Surg. ind. A.R.M. I.U.D.			Second stage delay.	Twins. (1) V. R.O.P. Manual rotation. (2) V. Int. podalic version.		Surg. ind. A.R.M.	Surg. ind. A.R.M.	
1	Weight 5.	[ <u>,</u>	2	†C	7	- c7c	0 9 9 9 9	4	4		► & - ×	64	71 54 and 51	<u>-</u>	0 0 0 0		_
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	Mode of Delivery.	Forceps -		Spontaneous - Undelivered -	Spontaneous -		Spontaneous -	Spontaneous - Spontaneous -	Spontaneous -	Undelivered -	Spontaneous - Spontaneous -	Forceps -	Spontaneous - Forceps and manual breech	Spontaneous -	Spontaneous - Spontaneous -	Spontaneous -   Spontaneous -	
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	Remarks.		Surg. ind. A.R.M.		Second stage delay. Second stage delay.	Surg. ind. A.R.M.		Flexner dysentery. Transferred	to region trosping:	Second stage delay. Irreg.	dibilitios di.	Surg. ind. A.R.M. Second stage delay.
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	Mode of Delivery.	Spontaneous -	Spontaneous -	Spontaneous -	Forceps - Forceps	Spontaneous - Spontaneous -	Undelivered .	Spontaneous -	Undelivered -	Forceps -	Spontaneous - Spontaneous -	Spontaneous - Forceps -
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	Reg. No.	4109	4111	4120	4128	4147	4193	4229	$\int 3706$	4249	4294 4295	4313

	Remarks		Surg. ind. A.R.M.	Forceps to a.c. head. Twins. (1) Breech. (2) Vertex.	Hydramnios. Surg. ind. Å.R.M. Death under anæs-	Twins. (1) Vertex. (2) Vertex. Ret. plac. Manual removal.	Blood transfusion.	I.U.D.	Fibroids complicating preg-	Lat. plac. prævia. Surg. ind. A.R.M. I.U.D.	Breech. Ext. version.	
	Weight b idO	lbs.	8 4	60 48.89 10 mg	4 84			43		9 3 3 4		L.4 12
To	Pyrexia Sepsis											
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at saure.	eed <b>giH</b> eerd bool	1	$\frac{190/100}{160/100}$	$\frac{170}{135}$	160/100	160/75 $160/100$	155/110	170/100	140/90	210/140	170/120	155/100 $170/120$
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***	Maturity Deliver	wks	37	39	26	38	 	36	16	38	33	37
·uc	VtirutsM SissimbA	wks	37	39	23	38	32	36	41	& & & & & & & & & & & & & & & & & & &	28	3.44 3.33 4.44
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	Remarks.		Surg. ind. A.R.M.		Surg. ind. A.R.M.					Diabetes mellitus.	Surg. ind. A.R.M.	P.U.O. Surg. ind. A.R.M. Twins. (1) Breech. (2)	id. A.R.M.
	F. Weight d.	-	7	1	6 4 6 64-13	$5\frac{1}{4}$	<u>ت</u>	$4\frac{1}{4}$	10 10 10 10 10 10		$6\frac{1}{4}$	$5\frac{1}{4}$ and	70 0 70 - 21 20  4
or	Pyrexia. Sepsis.			-		ľ						Д	
·ye	Parts per 1,000	Tr.	Tr.	Tr.	122 172 172	Tr.	Tr.	Tr.	H. H.				21
t sure.	Highes	140/100	200/120	140/95	$\frac{120/80}{170/120}$ $145/90$	200/120	150/90	200/120	$\frac{150/90}{175/115}$ $\frac{150/90}{150/90}$	150/90	140/90	160/100	$\frac{160/100}{170/110}$
d ys.	м разгиет	1	+-	<b>⊣</b>	111	1	I	I	111	ı	1	ı	
Symptoms and Duration in Days.	Eye.	-	1	1		1	l	I				I	+ + + 8
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Ohild.	Alive, Still-b or Died.	A	A	1	444	A	Q	SB	SB V I	1	А	A and	NA PA
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	Mode of Delivery.	Spontaneous .	Spontaneous -	Undelivered -	Spontaneous - Spontaneous - Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Manual breech Spontaneous - Undelivered -	Undelivered -	Spontaneous -	Spontaneous -	Spontaneous - Spontaneous -
te.v	Maturity S Delivery	39	40	30	37 40 40	37	34	36	40 38 30	17	36	38	40
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	Age.	33	40	28	33	35	37	39	34 37 20	36	40	35	27
	Reg. No.	182	190	208	945	231	232	239	247 248 260	261	269	288	358 393

	Remarks,	Surg. ind. A.R.M. Collapse after delivery. (See under	Shoulder presentation. Surg. ind. A.R.M. Prol. cord.	int. Version.	Failed version.	Sterilised.			Surg. ind. A.R.M.	Surg. ind. A.R.M. Second	stage delay.		C.P. D.C. 4 ins.	Sterilised.	
10	Jeghw S weight.	<i>1</i> 0	9		7		50			7	9	50 804	71	412	∞ €/4
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f.	esiH Blood Pres	200/150	190/130	140/90	130/90	$\frac{130/80}{170/110}$	165/100	250/130	200/110	140/90	140/95	165/110	145/95	220/130	160/80
and Days.	Abdomen.	I	1	1	1	1 1	1	1	1	1	1	I	1	1	ı
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Syl	.втэБэО	+0	ı	1+	-	1 -+- 1	- + 5	17	1	+ r	-	1		+ 5	40
d. Child.	Alive, Still-b or Died.	A	SB	İ	A		A	1	1	A	A	A	A	D	A
Mother d.	Alive or Die	A	A	A	A	AA	A	A	A	Ą	A	A	A	A	A
	Mode of Delivery.	Spontaneous -	Spontaneous -	Undelivered -	Spontaneous	Abdominal	hysterotomy Spontaneous	Dreecn Undelivered -	Spontaneous	Forceps -	Spontaneous -	Spontaneous -	Cæs. section	Cæs. section	(classical) Spontaneous -
‡.v.	A Maturity & Delivery	38	40	36	40	13	30	19	28	40	40	37	40	37	40
uo uo	ydirutsM § oissimbA 👸	38	34	35	40	11 23	35	15	20	40	38	35	38	35	40
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	Age.	22	35	24		20	36	31	-	31	31	28	22	40	38
	Reg No.	401	433	<b>435</b>	884	$\left\{ \begin{array}{c} 463 \\ 1626 \end{array} \right.$	464	f 466	925	472	473	558	559	578	581

		Remarks•	I.U.D. Surg. ind. A.R.M.	Plac. prævia. Ret. placenta. Manual removal.		Ext. acc. hæm. Surg. ind. A.R.M.		Hyperemesis (mild).	hyperemests. Wyocarditis.		Surg. ind. A.R.M. Surg. ind. A.R.M.	Surg. ind. A.R.M. Second stage delay.	Surg. ind. Sep. membranes.	Surg. ind. A.R.M.	Surg. ind. A.R.M. Second stage delay.		Surg. ind. A.R.M.
	ĵο	= Weight ∞ Chi d	50 TO	$6\frac{1}{4}$	İ	ಣ	ರ್ಷ ಎ	1	4		7 m	<u>ت</u>	9	6 2 2	5	7	7
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	t ans	səfgiH eərY boold	$\frac{160/90}{180/120}$	145/110	190/100	180/130	170/110 $155/110$	135/100	120/80 $160/100$	170/100	$\frac{180/100}{240/140}$	180/110	150/100	170/120	200/130	150/110	170/110
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	ns an in Da	Eye.			1	1		1	1 1	l	1 + 1	-+1	~	I	1	ı	
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Child.	OLIJ	Alive, Still-boor Died.	SB A	Ą	1	SB	4 <	d	SE		A	SB	Ą	A	A	A	<b>V</b>
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		Parity.	6-	ಣ್ಣ			∞ -			ಣ	.		_	બ	_	H	T.
		Age	38	32	25	1	43	22.2		39	25	30	19	30	31	63	25
		Reg No.	586	611	089	986	641	644 654	$\begin{cases} 1166 \\ 2670 \end{cases}$	F 672	7   1616   676	682	693	208	734	743	746

		Remarks.	Surg. ind. A.R.M.	Thr. miscarriage.	Ext. acc. hæm. A.R.M. in	labour. Surg. ind. A.R.M.	Cholecystitis.	Surg. ind. A.R.M. Second	stage delay. Cardiac mitral and aortic.	Surg. ind. A.R.M.			Surg. ind. A.R.M. Surg. ind. A.R.M.	Mitral stenosis.  Twins. (1) V. (2) V. Surg. ind. A.R.M.	
	ìo	Veight 5	L- 60144		51	$\tilde{5}_{4}$		<b>∞</b> ಬj≁	$6\frac{1}{4}$	6 8.4.4.4	17 9 14 10 14	က	9 9 7	$6\frac{6}{4}$	7 - 25
	TO	sixəry SisqəS													
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	and Days.	Abdomen.		1	1 1	-	ł	1	1		1 !	1		1 +	1
	ms and in Day	Eye.	1	-	1 1	1	1	1	+ 0	o   +c	n + 1 c	- 1	1 1	1 1	1
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		Beg No.	759	1516	1565	807	608 ∫	1267	852	838 845	862 869	870	885 913	927	938

	Remarks	Mastitis and phlebitis.			P.U.O. Broncho-pneumonia.		Surg. ind. A.R.M.	Second stage delay.	Irreg. dismissal.		Surg. ind. A.R.M. Mild	Surg. ind. A.R.M.	Surg. ind. A.R.M. Surg. ind. A.R.M.	Hydramnios. Twins. (1) Br. (2) Vertex. I.U.D.
lo	Weight 5. Weight d	9	10			51	8 14			1.0 4.	71	52	& C ⊢ ∞ 4	3 ³ and 3 ¹ 3 ¹
10	Pyrexis.	Д			Ъ		distance				$\infty$		1 !	1
ch.	Parts Esbac	64		.	Tr.		ા		6.1	1	61	+	9	4
t saure.	səfigiH sərq boold	160/110	$\frac{160}{165}$	140/80	$\frac{170/96}{170/110}$	190/130	200/120	170/90	180/110	145/95	170/110	160/100	$\frac{200/100}{170/110}$	185/120
d ys.	пэторбА	1	1 1	1	1 1	1	I	ı	1	1	ı	!		1
ns an in Da	Eye.	-	1 +	1	+ ]	1 + 1	+ 6	2 1	1		<b>⊣</b>		1 1	
Symptoms and Duration in Days.	Headache.	1	1 1	+ 5	3	+ 6	00 + 00	5 + 1	- + c	4	+ c	4		
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Opi id.	Alive, Still-b or Died.	A	A		A	A	Ą.	SB		A	A	A	44	SB and S B
Mother	eid to evila	A	AA	A	AA	Ą	A	A	A	A	A	A	_ A A	A
	Mode of Delivery.	Spontaneous -	Spontaneous - Undelivered -	Undelivered -	Spontaneous - Miscarriage -	Spontaneous -	Spontaneous -	Forceps -	Undelivered -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous - Spontaneous -	Spontaneous -
at .v.	* Maturity S Delivery	40	40	35	40	38	39	37	36	36	39	38	40	33
uo uo	ytirutaM \squares	39	39	33	40 24	36	39	37	34	36	36	38	38 88 88	31
	.Vdiraq	7	210				က	H	G	6.1			ж <del>г</del>	-
	Age	26	35		29	24	30	23	36	26	30	22	46 28	27
	Reg No.	940	944 7 969	1620	2102	1027	1037	1080	1096	8601	1178	. 1199	$1208 \\ 1239$	1242

	Remarks.	Hyperemesis.		Twins. (1) V. (2) V.	Breech. Ext. version.	Surg. ind. A.R.M. Surg. ind. A.R.M.	Surg. ind. A.R.M. Twins. (1) V. (2) V.	P.U.O.	Surg. ind. A.R.M.	Second stage delay. To Isolation Hosnital.	C.P. D.C. 4 ins. Surg. ind. A.B.M. Anencenhalv.	<del>-</del>
io	theight $\Xi$	80	ပ	$64\frac{4}{4}$ and	ಲ ಬ 4	63	41. 71. and	0	52	1	32	
or	Sirexia Sepsis	1 1	l	1 1				P	1	$\infty$		1
су.	Parts Esba	Tr.	1	2	Tr.		િગ	Tr.	∞	<b>⊢</b>  21		ಣ
seure.	Highes	$\frac{110/70}{160/104}$	170/90	$\frac{180}{160}$	170/90	170/90 140/90 150/110 140/106	120/100 170/110	170/100	200/150	155/105	150/110	180/100
d. ys.	пэшордү	il	opa,	1 !	1	1	1 1	1	!	1	1	1
Symptoms and Duration in Days.	Eye.		1		+		1 +		+ 7	14	1	l ·
mptor	Неадасре.	1 +		1 1	1	;     +-	<del>-</del>		+ 8	8 1	i	+ &1
Sy	Oedema.	1 + 5	7 + 5	1 + 4	4- 5	7	1 + 24	+ 5	127 + 5	3 + 2	+ !	1
	Alive, Still-b or Died.	A	A	A D and	DA	A   A	A A and	44	$^{\mathrm{SB}}$	A	SB	<b>公</b>
Mother	Alive or Die	AA	A	AA	A	4444	A A	Ą	A	A	K	¥
	Mode of Delivery.	Undelivered - Spontaneous -	Spontaneous .	Spontaneous - Spontaneous -	Spontaneous -	Spontaneous - Undelivered - Spontaneous - Undelivered -	Spontaneous - Spontaneous -	Spontaneous -	Spontaneous -	Forceps -	Spontaneous	Spontaneous -
±8,4	g Maturity Belivery	11 39	40	40 36	38	35 35	36	39	38	38	39	35
uo uo	ytinutsM 🕏 oissimbA 🛣	10	37	39	37	40 38 40 34	36	38	38	36	39	28
	. Varity.	es			67	70 H 61 61		<del>,</del> -	p===\(\frac{1}{2}\)	<del></del>		-
	Age.	30	30	27	34	42 24 19 26	34	39	21	20	36	33
	Reg. No.	1246 3592	1254	1272 1298	1333	1335 1342 1368 1426	1649	1453	1458	1497	1510	1529

Remarks	Epilepsy. Surg. ind. A.R.M.	Surg. ind. A.R.M.	C.P. Manual rotation.	Surg. ind. A.R.M. I.U.D. Sterilised.	-	Breech. Ext. version.		Ext. acc. hæm.	Twins. (1) V. (2) V.
or Meight of Shi d.	01	ار دار	L	1464	7	16 14 0	9.00 101 101	4	34 and 34
Pyrexia or Sepsis.									
Parts Esbach.	F   F	Tr.	3 <u>1</u> Tr.	] Tr.			FE	Hz zel-	<b>L</b>
Highest Blood Pressure.	$\begin{array}{c} 145/80 \\ 145/100 \\ 150/100 \end{array}$	160/110	180/110	$\begin{array}{c} 175/120 \\ 150/100 \\ 220/125 \end{array}$	150/100	$\begin{array}{c} 180/120 \\ 160/100 \\ 146/100 \\ 170/90 \end{array}$	$\begin{array}{c} 170/110 \\ 170/100 \\ 160/90 \end{array}$	$\frac{135/85}{165/110}$	190/120
Abdomen S		1	1 1	1 1 1	ļ	1 1 1 1			1
Headache.  Headache.  Headache.		+ 21	1 1		1	+	+	1 1	+1-
Headache. Headache.	+;	4	+:	9 1 + +		+		1 1	i
Oedema.	[ ] [	I	+ 7 +	04   1	+ t	-   +   +	+++8	V 1 + 7	150
Alive, Still-born E	SB	A	A A	A A	A	A   A A	A A	D	D and D
Alive or Died,	ব্যব	A	A A	444	A	4444	444	A A	Ą
Mode of Delivery.	Undelivered - Spontaneous - Spontaneous -	Spontaneous -	Spontaneous - Forceps	Spontaneous - Spontaneous - Abdominal	hysterotomy Spontaneous -	Spontaneous - Undelivered - Spontaneous - Spontaneous -	Spontaneous - Spontaneous - Spontaneous -	Undelivered - Spontaneous -	Spontaneous -
* Maturity at Delivery.*	29 40 39	40	40	40 32 15	38	300 300 310	40 37 40	28 34	37
no girutis s Admission.	3278	37	40	40 32 13	37	330	40 37 40	32	36
Parity.	9   1	, ,	2 -	ପଟାର	6.1	12   12	F-41 C1	01	-
Age.	45	29	33	30 40	29	29 26 <u>-</u> 40	40 43 24	22	22
Reg. No.	1540 2335 1553	1559	1582	1594 1598 1599	1603	$\begin{cases} 1602 \\ 1604 \\ 1904 \\ 1643 \end{cases}$	1644 1647 1661	$\left\{ \frac{1677}{2155} \right\}$	1681

	Remarks.	Anencephalic. S.B. Ret.	placenta expressed. Second stage delay.					Puerperal insanity.	Surg. ind. A.R.M.	Twins. V. and V.		Surg. ind. A.R.M.	Second stage delay.		
	to tdgisW ≅ b idO ≅	63	© &	∞	-	33	C. 4	62	9	$5\frac{3}{4}$ and	41 61 62	4 6)4	443	00	63
-	Pyrexia or Sepsis.							!				-	l		
	Parts Febsch.				Tr.		+	1	-	Tr.	1	9		1	9
.91	tashgiH usssr4 boold	160/90 $150/110$	$\frac{180}{140}$	140/95	180/130	160/110	160/115	170/110	140/95	150/90	160/90	190/120	180/130	140/90	150/100
ď	Abdomen Abdomen	1 1	1 1	1	-1	1	1	1	1	1	1	1	1	T	1
ms and	Hye.	+-	<b>⊣</b>   +	+	1	1	ĺ	+	1	+	+-	# T	+ =	#	1
Symptoms	Headache.	1 1	1 + 8	05 + 56	0%	1	+1	+ 5	8 1	1	+	+ 5	2 +	+ 7	<u> </u>
20	Oedema.	+ -+ 6	00 1 + 6	S + S	3+1	- + -	++	+ 5	12 + 7	180	+ 5	1 + 5	2+3	3 + 5	± 1
Child.	Alive, Still-bor or Died.	A	A A	A	A	C	S.B	A	A	A	44	A	A	A	¥ .
Mother	Alive or Died.	44	44	A	. A	A	A	A	A	A	A	A	A	A	4
	Mode of Delivery.	Spontaneous - B.B.O	Forceps - Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous -	Forceps -	Spontaneous -	Manual breech
1	Raturity a	40	40	4.0	37	38	30	40	39	40	40	35	37	36	36
u	io tdirudski 🕺 noissimbA 🖁	40	30	38	36	38	30	40	37	40	39	33	36	34	35
	.vaired	014	14.	4	F	7	6.1	ಣ	4	<b>c</b> 1		6	<del></del>	ಣ	1
	Age	41 36	32	39	26	24	37	45	23	25	27	42	28	32	25
oi.	Reg No.	1704	1793 1796	1801	1848	1865	1935	1979	1995	2025	2036	2039	2066	2084	2097

	Remarks,	Surg. ind. A.R.M.			V. and Viransfusions.	shock. (See under nearns.) Surg. ind. A.R.M.		Second stage delay.			Surg. ind. A.R.M.	Surg. ind. A.R.M. Uterine inertia. P.U.O.	
lo.	Weight Shild	ŭ	140	8	5 and		9	52	±4 - 14	∞	10 1 − 1 ∞	61 61 and	0.0
or or	sixəry SisqəS	1	1	1	i							10	
rcp.	Parts February 1,000	Tr.	83	Tr.	4	-	1	ယ မ <u>ု</u> 4	ლ ე		Tr.   Tr.	63	1,
ds enuss	Higher Blood Pres	140/95	210/125	140/90	160/100	140/90	230/120	175/130	170/120	160/100	180/100 160/110 150/100 160/100	150/110 $165/100$	150/90
and Days.	Abdomen.	1	1	1	1	1	1	1	1	1	1 1 1 1	1 1	1
ms and in Day	FAe.	1		1	!	, +		+	+		1 1 1 1	1.1	1
Symptoms Duration in	Неядасре.	+5	2 + 6	90	-	+	1	1	+ =	+	1 1 1 1		1
Sy	Oedema.	+ 5	+ 2	+ 5	+	+ 2	) 101 101 101	7+ 6	8 + 2	#	+   + +	$\frac{21}{12} + \frac{21}{12}$	+4,
Child.	Allve, Still-lor Died.	A	D	A	A	O A	SB	A	A	A	44   4	D A and	44
Mother,	Alive or Die	A	A	A	O	A	A	A	A	A	বববব	44	A
	Mode of Delivery.	Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous and forceps	Spontaneous -	Spontaneous -	Forceps -	Spontaneous -	Spontaneous	Spontaneous - Spontaneous - Undelivered - Spontaneous -	Spontaneous - Cæs. section (classical)	Spontaneous -
,y.*	A Maturity Deliver	30	36	40	30	40	35	38	37	40	37 40 38 40	\$ \$ \$ \$ \$	40
uo uo	gdrindsM &	39	36	40	36	39	35	37	37	40	37 40 40 40 40 40	83. 4.	40
	V3i1sA	67	H	୍ଷ	Η,	23		Н	Ø1 .	ಣ	20	H 44	-
	Age.	34	32	32	24	32	21	23	36	30	4222	18 40	25
	Reg No.	2109	2132	2160	2113	2114	2172	2173	2182	2220	2231 2267 2282 2333	2358 2361	2382

		Remarks.	Breech. Ext. version. Second stage delay. P.P.H. Blood	Sterilised.	To Isolation Hospital. Dis-	Face to pubis delivery. I.U.D.	Surg. ind. A.R.M.		I.U.D.	Eclampsia. P.U.O.			Thr. abortion. Sterilised.		To Bellshill.
	30	To Weight Ds. Ohi d	62	& 1,4, ℃	$6\frac{1}{4}$	6- 1-2-1-4-	t- 64	63.	1 4	53	\$\frac{1}{4}\infty\$	$6\frac{1}{4}$	9		
	TO.	sixəry ^q Sepsisa			<i>V</i> )					10					1
	cp.	Parts per 1,000	1	—i4		61			E	: : :	Tr.	Tr.	Tr.	Tr.	
	ssure.	aefigiH gang boold	170/100	150/90 $210/130$	150/100	$\frac{150/110}{130/100}$	160/105	190/120	$\frac{160/90}{135/85}$	170/110	140/100 $155/100$	165/105	$\frac{-}{200/135}$	175/115	140/106
	and Days.	иэшорд у	1	1 1	I	1 1	1	1	1 1	1 1	1 1	1	1 1	1	1
	ns and in Day	Eye.	1	+ 1	1	1 1	1	+	+ 1	1 1	1 1	+	1 1	1	1
1	Symptoms Duration in	Headache.	1	1 + 6	201	++8	S 1	+9	3 + 1	1 1	1 1	+ &	3 1 1	1	1
1	Sy	.sməbəO	+06	+	+	1 +8	3 + <b>c</b>	7 + 5	3 + 1	++	+;	02 + 03	3   +	+ 5	7
	Sorn Shild	Alive, Still-b or Died.	A	AA	SB	A	A	A	SB	SB	AA	A	A		] .
	19	Alive or Die	<b>A</b>	AA	A	44	A	A	44.	44	A A	A	A	A	A
		Mode of Delivery.	Forceps -	Spontaneous - Cas. section	(classical) Perforation and	Spontaneous - Spontaneous -	Spontaneous -	Spontaneous -	Undelivered - Spontaneous -	Undelivered - Spontaneous -	Spontaneous - Forceps -	Spontaneous -	Undelivered - Cæs. section	(classical) Undelivered -	Undelivered -
	*.v	Asturity S Delivery	36	40	40	388	40	40	က တ	ည လ လ	40	37	38	35	40
		oissimb <b>A</b> 🕱	35	40	37	8 8 8 8 8 8	40	40	38	38	40	37	31	32	40
		Parity.		-100	H	<del>+</del>		અ	F-1	-		9	01	63	
		Age.	29	30	31	28	24	38	34	50	24	34	37	34	20
		Rogs No.	2384	2406 2413	2415	2427 2434	2437	2444	2447	$ \begin{cases} 2464 \\ 3069 \end{cases} $	2469 2502	2504	$\begin{cases} 2507 \\ 3281 \end{cases}$	2541	2555

		Remarks.				Surg. ind. A.R.M.	C.P. D.C. $3\frac{1}{4}$ ins. Mastitis.	Plac. prævia. Blood trans-	Disproportion.	Surg. ind. A.R.M.	Pyrexia urinary.	Second stage delay.	Anæmia. Surg. ind. A.R.M. Two blood transfusions.	Face to pubis. Plac. prævia. Manual removal placenta. Blood transfusion. Trans-	ferred to Isolation Hospital. Dismissed well.
	To.	Weight Shild		$6\frac{1}{4}$	4.	5	91	$6\frac{1}{4}$	24	$9\frac{1}{2}$	8	701-	0 L 70 	D 0 4	
	ю.	sixəry4 sisqə8		1			Ъ			1	d d			\omega	
	.वंठ.	Parts Esba		Tr.	Tr.	Tr.		Tr.	Tr.	4	Tr.	Tr.	۵	11 11	
	ts Janes	eəfgiH eər4 boold	160/110	160/110	160/100	170/110 $150/100$	150/100	150/95	160/100	220/120	160/120	$\frac{150/100}{156/120}$	150/90 140/90 220/130	150/100 150/110 170/120	
77	ys.	Abdomen.	1	1	1		ı		1	1		1.1	1 1	1 1 1	
	Duration in Days.	Eye.	1	1	+ 8	3   +	<del>6</del> 1	ı	+ 8	) 	+ %	311	1 1 1	1 1 1	
1	ation	Headache.	1	+-	+ %	3++	e I		+ 8	% I	+ %	311	1 1 1	+	
2	Dur	Oedema.	+5	17 +	1	++	8+8	0e 1	+ 8	000 + 7	4 + %	3 1 + 8	3     + 8	3	,
Child.	11300	Alive, Still-b or Died.		Ą	Ą	AA	A	$_{\rm SB}$	A	Ą	A	AA	444	A SB D	
Mother	·pe	oid so svilA	A	A	A	AA	A	A	A	A	A	AA	444	44.4	
		Mode of Delivery.		Spontaneous -	Spontaneous .	Spontaneous - Spontaneous -	Cæs. section	(L.U.S.) Willet's forceps	and traction Cas. section	(L.C.S.) Spontaneous -	Spontaneous -	Spontaneous - Forceps -	Spontaneous - Spontaneous - Spontaneous -	Spontaneous - Spontaneous - Spontaneous -	
-	ats ¥.₹	Maturity Deliver	36	38	39	40	40	34	38	39	40	40	36 83	40 39 37	
	°uo	ytirutsM § bissimbA &	34	37	39	40	38	33	38	33	40	40	30 30 30 30 30	40 39 37	
		Parity.			<del></del> +	<b>П</b> 4		9	7	গ্ৰ	, person i		<b>⊢</b> ⊢ ⊀	- x c1	
		Ago.	25		24	222	27	43	32	37	25	22.	2000	19 38 41	
		Reg No.	2556	2797	2570	2574 2569	2625	2641	2652	2658	2665	2692 2693	2701 2748 2769	2775 2785 2792	

	Remarks.		Compound presentation. V.	Sterilised.	C.P. D.C. 4 ins.	Soond stage delay		Elderly primigravidæ.		Cardiac.	Mastitis.	Plac. prævia. Surg. ind. A.R.M. Second	Twins. Br. and V.		Twins. Br. and Br. Surg. ind. A.R.M. P.U.O.	Second stage delay.	Mitral stenosis.
	Weight S. Child.	∞ ⊐ 01	7		6,4	7 -7	- 6  4-14	で (2)	50		∞ o 4	£ 7	5 and	16	64 and	10 00 -  416  4	31
Or	Pyrexia.			1	1					1 6			1		4	i	
ch.	Parts Esbac	Tr.	67	Tr.	Tr.	1	Tr.	——————————————————————————————————————	Tr.	1	1		4	1	ಲ್ಲ ಈಪ	Tr.	
arus:	earH Highes	160/120	150/100	210/130	150/80	140/90	154/70	240/150	160/90		140/100	$\frac{150/100}{160/120}$	170/105	180/110	150/105	170/120	140/95
d ys.	*hodomen.	1	ı					1	1	1		1-1	1	1		1	1
ns and in Days,	Lye.	1	I	I	1	1	i I	+	I	i	+6	6	+ 7	+61	+	1	-
Symptoms Duration in	Headache.	1	ı		!			ı	I	1	+		+ 7	+ 6	77	. 1	
Sy	Oedema,	. +- 6		ı	ı	i		+	120+	ı	 +	1+1	-+1-	+	+99	+ 1-	-
Orn Child.	Alive, Still-b or Died.	SB	A	1	SB	SB <	44	A	A	A.	K	AA	D	A	A and	K K	Ω .
Mother d.	eid to evilA	A	A	A	V	∢ <	44	A	A	¥.	A	AA	A	A	A	A	A
	Mode of Delivery.	Spontaneous -	Forceps	Abdominal	hysterotomy Forceps	~	Forceps -	Cæs. section	(classical) Spontaneous -	Spontaneous -	Spontaneous -	Spontaneous - Forceps -	Spontaneous -	Miscarriage -	Manual breech	Forceps -	Spontaneous -
4.v	A Maturity B Sirer	40	40	10	40	40	40	36	37	36	40	40	36	26	39	37	35
on on	ytirntsM \(\beta\)	40	40	$\infty$	40	40	40	36	37	36	40	40	34	26	33	37	35
	.Varity.	6.1	23	4	-	တ -		-	ಣ	4:	<u>ت</u>	4-1	ಣ	4	-		<u>-</u> i
	Age.	33	39	22	22	30	કુ ટ્રા 	46	40	27	27	23 65	25	26	20	33	25
	Reg No.	2796	2808	2823	2835	2855 2855 2065	2868	2870	2875	2876	2878	$\frac{2910}{2922}$	2928	2945	2951	2959	2974

	Remarks.	Surg. ind. A.R.M.	Sterilised.	O.P. Manual rotation. Second stage delay.			Surg. ind. A.R.M.	r negmasia.	Second stage delay. Irreg. dismissal.		Surg. ind. A.R.M. Second	seage uctay.	Pyrexia urinary. Surg. ind.	R.O.P. Manual rotation. Pyrexia urinary.
	Weight of Child.	814		60 C	10	1 - 0 6 - 1	54	9	0 8 8 8 8	12   22	F-	ರಾ	Lic3	104
	Pyrexia or Sepsis.			i	1								러.	<u>a</u>
	Parts Habach	91	Tr.	ËË	-			Tr.	Tr.		C1 12	1	ಣ	9
I.G.	tsəfigiH ussər4 boold	186/110	140/95	155/100 $150/100$	210/130	150/75	$\frac{140}{90}$	144/100	140/90 $160/95$	$\begin{array}{c} 155/95 \\ 150/100 \\ 170/120 \end{array}$	160/110	150/100	170/130	170/105
75	Abdomen.	1	1	1 1	1	1 1	1	1	1 1	1 1 1	1	1	1	1
Symptoms and	Eye.	1+	- 1	1	+-	- 1 I	1 1	ı	1+3	7     +	-i	1	.1	1
mptor	Headache.	+ =	<del>1</del> +	1 1	1	1 1	1 + \$	0# 1	1 + 5	1	1	+	1	1
Sy	Ocdema.	+ 6	); +	++8	8 + 8	) I +	1 1	+ §	3   +3	7     +	+ 6	2 + 5	17 + 1	14
Child.	Alive, Still-borr or Died.	A		SB A	SB	AA	A	CI	AA	444	D	A	A	A
Mother	Alive or Died.	A	A	AA	A	44	44	A	AA	444	A	A	A	A
	Mode of Delivery.	Spontaneous -	Abdominal	nysterotomy. Forceps	Spontaneous -	Spontaneous Manual breech	Spontaneous -	Spontaneous -	Forceps - Spontaneous -	Spontaneous - Spontaneous - Spontaneous -	Forceps -	Spontaneous -	Spontaneous -	Forceps -
	A Maturity at S. T. T. T. T. T. T. T. T. T. T. T. T. T.	40	13	34 40	40	38	327	40	40	40 40 39	39	40	40	40
	an Maturity on S. Admission.	38	12	34 40	40	38	36	40	40	40 40 39	38	30	38	40
	Parity.	67	ಬ	, —i —	2		ာ တ	61	. co I	<u> ಅ</u> ಅ	-	ಣ		H
	Age.	31	31	25	35	222	000	38	34	24 32 32	24	40	20	28
	Reg No.	2985	3002	3008	3026	3049	3088	3093	3106	3125 3131 3134	3139	3143	3144	3145

	Remarks.		Scabies.	Surg. ind. A.R.M.			Surg. ind. A.R.M.			Pyelitis (mild).	Second stage delay.		Hyperemesis (mild).		Second stage delay.		F.F.O. Second stage delay.
	Weight S. Ohild.	9 7	4	∞ ಲ ಬ ∻	-1	1	~ <u>5</u>	Ø.	 0 0 44 wl4		<u>r</u> -∞	9	1	ಸರ	63	72	7
10	Pyrexia. Sepsis			1 1		l						1	-			1	
су	Parts Esbac	24		Tr.	-	Tr.	Ir.			H S1	Tr.	Tr.	ئے ا			Tr.	
ts saure	səhgiH Blood Pres	190/125	011/691	$\frac{140/95}{200/125}$	170/110	140/105	$\frac{125/90}{210/120}$	140/00	$\frac{140}{30}$	115/75	140/100 $160/100$	150/100	140/94	180/110	$\frac{180/100}{170/110}$	170/100	150/90
and Days.	Abdomen.	1	1 1	1 1	ı	ı	1 1		1 1	į	1 1	1	t e	1		1	1
ns and in Days	Eye.	1	+ 1	1 1		1	1 +	14	] [	1	1 1	1	1	+ 1	- 1 1	ı	
Symptoms Duration in	Headache.	+	+	1 1	ı	[	+	14	1 1	I	1 1	+	ı	1	+ r	- +	1
Sy	Oedema.	+		1 + 5	7 + 8	3 1	1 1	_	+	1	1+;	4 + 5	); 	+- ++ 1	- 1 + 2	1 + 5	2
	Alive, Still-b or Died.	A-	A	AA	A	.   -	4.4	<	₹ <b>4</b>		A A	A	1	4	A	A	A.
d. Mother	Alive or Dia	A.	4 A	AA	A	A.	AA	<	₹ ₹	A	AA	A	4	44	44	Ą	A
	Mode of Delivery.	Spontaneous -	Spontaneous - Undelivered -	Spontaneous - Spontaneous -	Spontaneous -	Undelivered .	Spontaneous - Spontaneous -		Spontaneous -	Undelivered -	Spontaneous - Forceps -	Spontaneous -		Undenvered - Spontaneous -	Forceps - Undelivered -	Spontaneous -	Forceps -
ås.	A Maturity Stringery Delivery	38	4 0.2 0.3	37	31	38	ය. භ භ	)	04	317	40	40	17	2 6 20 6 20 7	37	36	40
on.	ytirutsM \(\beta\) oissimbA \(\beta\)	36	40 28	37	29	37	ယ ယ က က	;	04	36	40	40	16	35	37	34	40
	.vdineA	9	ю н	m	-		60	) (	51 G	1 —			က		c1 -	Т.	Н
	Age.	28	227	124	29	27	1 50	) 1	27 c 22 d	23	32	21	28	29	93 93 94	31	53
	Reg No.	3155	3157	\(\frac{3861}{3183}\)	3187	£3188	3374		3202	(3222	(3612)	3236	(3267	3268	3292 3300	3305	3313

		Remarks.	Prol. arm. Int. podalic	version.	Second stage delay.	Surg. ind. A.R.M.		I.U.D.	Surg. ind. A.R.M. Second stage delay			I.U.D. Alveolar abscess.
	ło	. Weight = ĕ.			$6\frac{1}{2}$	7	5	10 73	10 721 722 723	8 7	1111	
	10	Pyrexia. Sepsis.										
	'प्र	Parts Esbac		52	Tr.		25	<u> </u>	Tr.   12.	1	Tr.	-
	t sure	Highes Blood Pres	06/011	200/126	150/90	011/091	155/100	$\begin{array}{c} 165/100 \\ 145/90 \\ 160/110 \\ 175/125 \end{array}$	$\begin{array}{c} 210/140 \\ 140/70 \\ 150/110 \\ 176/130 \end{array}$	150/90	150/100	$\begin{array}{c} 160/110 \\ 150/110 \\ 140/105 \\ 150/90 \\ 150/90 \end{array}$
	y ys.	Abdomen.				1	1	1   1	1 1 1 1	1	l	1 1 1 1 1
	Symptoms and Duration in Days.	Eye.	1	1	1	+ 8	020	1 1 1 1	1 1 1		1+	~
	mptor ation	Headache.	1	+ -	<b>→</b>	+ 8	99	+	1 1 1 1	+-		1     +
5	Dur	Oedema.	+	+1	- + 8	3 + 8	95 + 2	1     + n	+	35 + 35	8 +	1 1 + 1 + 6
Child.	IIJO	Alive, Still-b or Died.	A		A	A	А	SB A	বৰৰৰ	A	A	SB
Mother	d.	eid to evilA	A	A	A	A	A	বৰবৰ	বৰৰ	A	A	বৰবৰৰ
		Mode of Delivery.	Spontaneous	breech Miscarriage -	Forceps -	Spontaneous -	Spontaneous -	Spontaneous - Spontaneous - Undelivered - Spontaneous -	Spontaneous - Spontaneous - Spontaneous - Forceps -	Spontaneous -	Spontaneous -	Undelivered - Spontaneous - Spontaneous - Undelivered - Undelivered -
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	•110	k Maturity SissimbA &	40	53	40	40	36	40 40 28 34	39 40 40 38	40	40	30 35 35 35
		Parity.	$\infty$	6.1	<i>(</i> —	ಣ	4	5001	r-:e		∞	1   0   1
		Age.	7	32	30	30	25	36 23 18	8999	42	36	23   25   25
		Reg. No.	3314	3324	3326	3342	3360	3368 3372 3376 3835	3378 3447 3453 3385	3391	3401	$\begin{cases} 3406 \\ 3976 \\ 3419 \\ 3427 \\ 3944 \end{cases}$

	Remarks.		Hydramnios. Disproportion.		Irreg. dismissal.	on.	Second stage delay. Chlorof.	potecting.	Surg. ind. A.R.M.	C.P. D.C. 44 ins. Surg. ind. A.R.M. Second stage delay.	Manual rotatio	Surg. ind. A.R.M. P.O.P. Manual rotation. Pyrexia	urmary. Second stage delay.	I.U.D. Scabies.	C.P. D.C. $4\frac{3}{8}$ ins. Mastitis.	Hydrocephalus.	C.P. D.C. $4_4$ ms.	1
10	eight Child.	W Ibs.	$10\frac{1}{2}$	7		91	$\infty$	1.	71	64	\$ 70 	13	70 Q	52	80 1 4 w 4	10	0 10 401-401	
TO.	sixəry sisqə8	$_{\rm b}$					1					<u> </u>		1	64		1	
ср	Esps	Parts per 1,000			c1	11	Tr.	Tr.	Tr.	12	=	्र चंदर		1	Tr.		15.	
saure	Highes d Pres	Blood	150/95	150/105	150/100 $170/110$	$\frac{130/70}{140/100}$	150/110	160/114	260/130	160/105	140/100		140/100	150/110	140/100 $180/110$	140/85	140/110  $ 170/110 $	the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon
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as and in Days.	e.	EY	1			1 1		!	+6	120		1	+	+	1 1	1	1"+	40
Symptoms uration in	eptor.	Heads		+ 1	-   + a	2	1	İ	+	1		+	1 1	+	1 1	1	1 1	
Sympt Duratio	•BITTS	obeO	+8	3 + 2	4 + + 2	# 1 1	+ 5	77 + 5	+66	177 +	+ +	- + 4	+ +	30+	1 1	+	++	40
Child	Still-b Died.	,9vilA '10	A.	Ą.	AA	A	A	S B	$\forall$	A	4; C	SB	A A X	SB	AA	SB	SB	
er	or Die	өүilA	A	Ą	AA	AA	A	A	Ą	A	4 ◊	14	₹ 4	1 4	AA	A	4.4	
	Mode of Delivery.		Cæs. section	(L.U.S.) Spontaneous -	Spontaneous - Spontaneous -	Undelivered -	Forceps -	Manual breech	Spontaneous -	Forceps -	Forceps -	Forceps -	Spontaneous -		Spontaneous - Cæs. section	(classical) Spontaneous	Spontaneous - Spontaneous -	1
3.6 *.\?	turity eliver	s Ma S S	40	39	40	37	40	40	37	39	40	0.4	36	000	40	40	40 37	,
	urity oissim		40	38	40	37	40	40	35	39	40	40	36	36	40	40	40 36	)
	·Vdire			pare!	100	67	ī	П	55	_	П	9	O 7	H 4	. co -⊣	ઝ	- 9	
	Age.		34	28	444	37	31	30	37	36	87.5	33	21	9. Y.	36 29	28	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	
	Res.		3434	3463	3466 3474	3460	3483	3487	3503	3504	3506	3542	3543	3547	3558 3552	3572	3580 3585	

Remarks.	Surg. ind. A.R.M. Second	stage delay.	Second stage delay.			podalic version. P.U.O.	Sterilised.		Condylomata simplex.	D.			Pyelonephritis. (See under	F.F.O. Blood transfusion.	Surg. ind. A.R.M. Twins. V. and V. Int. version.
iv Jeight of S. Child.	63	46	0 10 0 460 4	#   [	C1  4	∞		82	67.0	. 1-	∞	7		8	61 62 and 5
Pyrexia or Sepsis.						<u></u>							<u> </u>		
Parts Esbach		1				Tr.	50	1			02		4	H.	31.
Highest Blood Pressure	150/100	140/90	200/120 $180/120$	150/90	$\frac{140}{175/120}$	160/74	230/150	165/120	$\frac{140}{90}$	180/120	150/90 $230/160$	140/100	150/90	150/100	140/95 $180/110$
Abdomen.		1	1 1	1		+	ı	1			li		1	1	1 1
Eye.  Hye.  Abdomen	.	1	1 1	1	+	S + Z	# 1	1	1 1		1 1	ı	+	1	
Symptoms.  Oedena.  Headache.	+	1	+	ı	1	1	1		+	-	1 + ]	4	+	1	
Oedema.	1	1	++	- 1 -	+ -+	8+5	# 1	+ 8	6   4	- 1	++	+ 8	2 + 8	+	1 + 04
Alive, Still-born or Died.	A	₹.	44	1   6	2 22 2 22 2 23 2 24 2 25 2 25 2 25 2 25 2 25 2 25 2 25	A		A	SB	T A	¥	A	Э	SB	A A and A
Mother or Died.	A	A.	44	4	44	A	A	A	₩.	44	AA	A	D	A	44
Mode of Delivery.	Forceps	Spontaneous -	Forceps - Spontaneous -		rorceps - Spontaneous	breech Spontaneous -	Abdominal	hysterotomy Spontaneous -	Spontaneous -	Cas. section	(L.U.S.) Spontaneous - Abdominal	hysterotomy Spontaneous -	Spontaneous -	Craniotomy -	Spontaneous - Forceps and manual breech
* Maturity at S. Delivery.*	38	325	94 88 88	221	20 co	37	18	40	35	40	40	39	33	40	40
a Maturity on Stations Admission.	36	32	40 36	20	200 200 200 200	37	16	40	32	04	40 24	39	32	40	36
Parity.		, ,	-1,20	) )	၁ က	9			7	Ħ <b>,</b> 1	10		4		<del>, , , , , , , , , , , , , , , , , , , </del>
Age	26	24	4 & 3 ,0 -	200	26 26	41	34	25	18	30	41 36	24	43	35	30
Reg No.	3614	3626	3643 3647	3653	9698 3696	8698	3714	3717	3724	3763	3781 3796	3800	3825	3838	3851

	Remarks.				Failed version.	Second stage delay.	Surg. ind. A.R.M.	Surg. ind. A.R.M.	Twins. (1) R.O.P. Manual rotation. (2) Transverse. Ext. version to vertex.		Hydrocephalus.		(1) V. Serond stage delay. (2) Breech.
	eight of Child.		51	81		<del>  4</del>   <u>8</u>   <del>4</del>	$5\frac{1}{4}$	で	63 and 21 21		9	8	63 and 7½
	rexia or Sepsis.	s _d											
	Евраср	Parts per 1,000	Tr.	Tr.		Tr.	1	Tr. 2	i— 51		+1:	Hr.	
92	Highest 1 Pressur	I Blood	180/120	160/120	140/100	$\frac{160}{170}$	190/120	$\begin{array}{c} 146/100 \\ 160/110 \\ 150/110 \\ 200/110 \end{array}$	160/90 $160/100$	130/90	156/90 $160/110$	08/091	150/105
p		robdA	ı	1	1		I	1   1		١		I	
ms and	in De	Ęλ	ı	1		.	l	1		1	+ 1	1	
Symptoms	ration repe	Heada		I		1 + 5	1+ 17	-     +			4 + 1	l	11
ממ	ema.	oede	+6	2 + S	3+8	3 + + 5	1   1	-       + r	-	+ ]	4++	+ 7	\$
Child.	Still-born Died.	Alive,	A	A		10	Ą	ব্ৰব্ৰ	A D and D	-	SB	A	A and A
Mother	or Died.	Alive	A	A	A	AA	A	ব্ধব্ধ	AA	A	AA	A	4
	Mode of Delivery.		Spontaneous -	Spontaneous -	Undelivered .	Undelivered - Forceps -	Spontaneous -	Spontaneous - Spontaneous - Spontaneous - Spontaneous -	Manual breech Forceps and spontaneous	Undelivered -	Spontaneous - Perforation	Spontaneous -	Undelivered - Forceps and manual breech
	turity at *.very.*	k Ma K S S S	40	40	36	8 8 8 8	39	40 40 39 39	38	37	39	40	8 6 8 6 8 6
	turity on mission.	kM P	40	40	36	37	35	40 40 37 38	35	36	39	40	37
	Parity.	[	$\infty$	H	p		-	60 60 60	10	63		<del></del>	62
	Age.		35	28	28	27	23	17 27 26 34	23	23	39	30	30
	Reg.		3858	3859	(3879	4032	3898	3902 3908 3913 3921	3948 3957	J 3960	$\begin{cases} 4163 \\ 3981 \end{cases}$	3985	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

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	Weight of Spild,		0 102 to 1	∞	10 7 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	<b>o</b>	7 50 10 10 10 10 10 10 10 10 10 10 10 10 10	C1 L L 4 L 0	1207	74 and 74
	Pyrexia or Sepsis.									
	Parts Esbach		vo	9	E		E-2	H 55.	H 01	
ð	Highest Tressur	150/90	140/96 $180/120$	150/110 $140/90$	140/100 $150/100$ $145/95$	150/119	$\begin{array}{c} 140/120 \\ 165/100 \\ 200/130 \end{array}$	$170/120 \\ 200/110 \\ 150/110 \\ 156/105 \\ 180/120$	$\frac{140/90}{160/105}$ $\frac{170/110}{170/110}$	156/96
-	Abdomen. Abdomen.	1				1			111	1
me and	Eye. Da						1	+	++	1
mpfor	Headache. Headache.		1-	1 1			1	+ 8	06   +	
) or	Oedema.	+6	2   + 2	#	+	-9 +;	4++1	+   +	+++1	
	Alive, Still-born or Died.		SB	A	444	4	A B SB		44	A A A
Mother	Alive or Died.	A	44	444		¥ V	444	ব্ৰব্ৰব্ৰ	444	A
	Mode of Delivery.	Undelivered -	Spontaneous - Spontaneous -	Miscarriage - Spontaneous -	Undelivered - Spontaneous - Forceps -		Spontaneous - Spontaneous - Spontaneous -	Spontaneous - Spontaneous - Spontaneous - Spontaneous - Spontaneous -	Undelivered - Spontaneous - Spontaneous -	Spontaneous -
	A Maturity at Delivery.*	36	35	27 40	16 10 10 10 10 10 10 10 10 10 10 10 10 10	40	327	40 40 39 38	38 40 39	40
	Admission.	34	32	24	30 40 40 76	40	30	988 988 39 35	36 40 38	40
	Parity.	-	,	୍ରାମ			— m		e — —	ಣ
	Age	41	27 26	29 26	2 2 2 5 2 5 5 5	18	21 30 30	200728 200728	88 4 5 6 1 4 5 7 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1	26
	Reg. No.	3990	4004	4009	4020 4022 4044	4059	4080 4082 4081	4088 4095 4085 4102 4115	4122 4134 4187	4190

		Remarks.		Second stage delay.		I.U.D.			Surg. ind. A.R.M. Flexner dysentery. To Isolation	Hospital.		C.P. D.C. 4½ ins. Pyrexia	urinary.	C.P. D.C. 4\frac{1}{4} ins. Surg. ind. A.R.M. Twins.	(1) V. (2) Breech. To Isolation Hospital.
	Jo	Neight 6		2 To	الم	ブ <b>ひ ブひ</b> 814年回		1	6) 6)	57.3	[- -	L/4		C 7	and 4 4 3
	<b>J</b> 0	Pyrexia Sepsis.							<u>P</u> ,		1	4		1 00	
	·प्	Parts per 1,000		.		c1	Tr.		142	1	Tr.	1	111	4	
	tere	Highes	150/100	145/90 $145/100$	150/90	150/90 $160/100$	.170/100	160/110	200/90	140/90	150/100	140/90	$\frac{195}{140}$	$\frac{180}{150}$	
-	and Days.	Abdomen.			l		ı		1	1	1	1	1 1 1	1 1	
	ms and in Day	Eye.			1			1	ı	1	ļ	1	1 1 + \$	7 1 1	
	Symptoms Duration in	Headache.	+ 1	-	1		+ 6	4	1			1	+		
- magnetic characters	Sy	Oedema.		+ ]	+ + 69	3 + 5	2 + 3	3+;	180	+	+ 5	12 +	+ 5	2++	4
	Obild.	Alive, Still-b or Died.		44	Ą	SB	4	A	A	А	SB	<b>V</b>	4, 4;	AA	and
	Mother	eid to evilA	A	A A	V	A 4.	V.	V.	A	V	A	K	444	AA	
		ery.	ة إس <del>رس</del> ا	<u> </u>	<u> </u>	<u> </u>	<u>8</u>	<u>8</u>	α '	<u>x</u>	· 22	<u>w</u>	<u> </u>	<u> 8</u>	1
		Mode of Delivery.	Undelivered	Forceps - Spontaneous	Spontaneous	Spontaneous Spontaneous	Spontaneous	Spontaneous	Spontaneous	Spontaneous	Spontaneous	Spontaneous	Undelivered Spontaneous Spontaneous	Forceps - Spontaneous	
	.γ.* γ.*	A Maturity	36	40	0+	36	40	40	39	\$\$ \$\$	40	40	25 40 40	40	
	•1110	ytirutsM \(\frac{\beta}{3}\)	36	40	38	36	39	40	38	36	40	3.0	27 <del>0</del> 88 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	40 35	
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		Age	25	3 co	15	29	£	56	36	CI.	34	50	38 38 38	33	
		Reg. No.	420-4	4201 4207	4208	4220	4222	4230	4271	4290	4299	4303	43325 43325 43338	4351 4354	

## 2.—ECLAMPSIA.

There were 46 cases of eclampsia during the year, 39 of which were primiparæ and 7 multiparæ. Twins 5 maternal deaths (10.9 per cent.). Pyrexia was noted in 9 cases. Twenty-seven infants were born alive and of these 6 died. There were 12 still-births. In 6 cases the child was born outside and the infant is not were noted in 2 cases. Three cases had been under ante-natal supervision at the hospital clinic. There were noted in the table. There were 2 miscarriages.

A.—Cases under Ante-natal Supervision at Hospital Clinic.

Under Symptoms the word EYE refers to Visual Disturbance and ABDOMEN to Epigastric Pain.

	Remarks.	Hyp. toxæmia.	Hyp. toxæmia. Surg. ind. A.R.M.	Death under anæs- thesia. (See under	Surg. ind. A.R.M. Perforation and Willet's forceps. (See under deaths.)	
sti'	I lo .oV			77		_
K	Type.			<u> </u>	H	
lo	tdgisW ₹			1	9	
	Pyrexia Sepsis					_
ch.	Parts February 1,000		Ir.	+ +	10	- troots
ssure.	eaffgiH eorf Pro	140/90	$\frac{165/105}{200/120}$	180/120	166/120	D_Doctmontum
ys.	Abdomen.	1			1	
Symptoms and Duration in Days.	Eye.	1	[ ]	ı	1	
mpton	Headache.	+	+	+7	+61	1
Sy	Oedema.	+ 5	2++6	4 + 2	+61	)-
Child	Alive, Still-L or Died.		A	Ω	SB	
됩	eid ao evila	A	AA	Q	9	
	Mode of Delivery.	Undelivered -	Forceps -	Forceps -	Spontaneous -	
122	A Maturity K Delivery		104	36	36	
	oissimbA 🛪	34	38	30	36	
	.Variety.	pend		-	H	
	Age	67	11	20	18	
	Reg No.	(1445	1791	2467	3931	

 $\Lambda = Ante-partum.$ 

I = Intra-partum.

	Remarks.	Surg. ind. A.R.M. A.R.M. in Jabour. C.P. D.C. 4 ins.	P.U.0.		Hydramnios. Anen-	Disproportion.	Cast obstruction. (See	Hæmaturia. Surg.	<u>2</u>	Blood transfusion.	Observed Shock.	
.sdi	No. of F	763	13	ಣ	-		4	<del>-</del>	- es	ol H	7	જા
	* 9qvT	AHH	H	A	A	<del></del>	¥	H	нн	4 F		4
10	Weight S. Child.	41 00 10 20 414442	∞ <u>70</u>		ಲ ಬ		<u>ير</u> 4	$\tilde{\mathcal{O}}_{\frac{1}{4}}$	60 8 4		$\infty$	
Or	Ryrexia. Sepsis.		P						2	L		
•प्र	Parts Per 1,000	a e di	12 9	67	12	+	11	9	+ 1-	6 Tr.	ဗ	- c2
t.eure.	Highes Hoold Pres	$\begin{array}{c} 140/120 \\ 180/120 \\ 150/120 \end{array}$	$\frac{175/130}{130/100}$	190/130	150/105	160/90	180/110	180/120	$\frac{200/100}{160/100}$	$\frac{158/120}{185/100}$	145/95	190/120
ys.	Abdomen,	1 1 +	+	+	+ 10	0 1	+-	-	1 1		1	
ns and in Days.	Eye.	+	1		1	1	1	ı	1 +-	-	1	
Symptoms Duration in	Headache.	1+1	1+1	- + c	n +	1	+0	1	1 + 2	<u>+</u> 1	1	
Sy	Oedema.	1++21	+++	+	+	-	1	1	+ ]	# 1 + 5	- - - - - - -	+1-
	Alive, Still-b or Died,	SB	SB		$_{ m SB}$	A	SB	9	A SB		\\ \frac{20}{20}	
Mother	Alive or Die	AAA	A A	A	A	A	9	A	AA	Y, W	A	A
	Mode of Delivery.	Spontaneous - Forceps - Spontaneous -	Manual breech Spontaneous -	Vaginal	hysterotomy Spontaneous -	L.U.S. cæs.	section Spontaneous -	Spontaneous -	Forceps - Forceps -	B.B.O B.B.O	Spontaneous -	B.B.O
da.	k Maturity Z Delivery	30 08	40	25	တ္	40	38	36	40	38	70	40
on on	ydirutsM \squares	38 40 30	40	24	36	40	38	28	40	34	40	40
	Parity.	— — — — — — — — — — — — — — — — — — —	<b>—</b> со	ಸರ	H	-	ಣ	-	HH	ପ୍ର	-	Т
	Age.	25 25 19	23.4	39	50	20	34	30	10	33	16	23
	Reg. No.	236 320 471	515 587	684	200	839	901	1255	1328 1468	$\frac{1536}{1648}$	1830	1835

Remarks.				P.O.P. Manual rotation.			ıd. A.R	P.P.H. (See under deaths.)			P.U.0.	P.U.0.
No. of Fits.	2	11.	12	9	ಬ ಸರ	তা	-	<del>-</del>	ಸರ	12	ಸಂ	<del></del>
Type.*	-		1 and	Н —	I I and	4 64	A	<b>H</b>	A	Д	<b>⊢</b> ⊣	
Weight of Child.	73	8 14 6	10	∞	∞ 70 ⊢ 4- c1	4	62	∞	43 and		∞	6
Pyrexia or Sepsia.			10	1							<u>-</u>	<u>P</u>
Farts Esbach.	12	+++++	Tr.	++	++	යෙ වැදැ	<u>ب</u>	++	15	2.1.4	+ +	+
Highest Blood Pressure.	190/120	160/100 200/110	155/105 170/130	184/100	135/95 $160/100$	180/134	175/120	158/105	165/120	160/80	170/120	132/78
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Live, Still-born gid no Died.	A	A SB	SB	A	AA	A	A	A	Dand		A	A
Mive or Died.		AA	AA	A	<4	A	A	D	A	A	A	A
	-	ş 1	ed -	1	· snc	- sno	1		- sno		à à	1
Mode of Delivery.	Forceps -	Forceps - Forceps -	Undelivered Spontaneous	Forceps -	Forceps - Spontaneous	Spontaneous	Forceps -	Forceps -	Spontaneous	B.B.0.	Forceps	Forceps
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Moturity on Admission.	wks   40	40	38	40	40	32	36	40	33	40	40	40
Parity.			-	-		r-i	H	-	H	H	-	<del></del>
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Reg No.	1876	2312 2422	$\begin{cases} 2464 \\ 3069 \end{cases}$	2473	2526 2726	2735	3052	3113	3121	3126	3279	3289

	Remarks.	Surg. ind. A.R.M. R. O. P. Manual	rotation.		(See under deaths.)		Spontaneous mis-	carriage. Surg. ind. A.R.M.	Mixed acc. hæm.	A.K.M. in labour.	F	R. O. P. Manual	rotation. Surg. ind. A.R.M.	Breech. Failed version. Surg. ind. A.R.M.	
°s	No. of Fits	ಣ		ထ	10	ಣ	-	9	-	10		-	∞	<b>2</b> 1	
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7*	Parts Espach	9	+		++	12	-\s	9	<b>□</b> -1 © 4	+ +	Ä	+	11	œ	
ure.	Highest	205/125	150/120	210/120	160/110	174/114	210/140	150/110	182/96	212/115	160/110	128/90	165/100	200/120	
	Abdomen.	ı		1+	- + -	<b>⊣</b> 1	1	+-		1	1	1	1	-	
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18	Alive or Died,	A	A	A.	<u> </u>	₹	Ą	Ą	A	Ą.	A	Ą.	A	A	
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	Mode of Delivery.	Forceps -	Forceps -	Forceps -	B.B.0	B.B.0	Miscarriage	Miscarriage	Spontaneous	Cæs. section	Forceps -	Forceps -	Spontaneous	Spontaneous breech	
11	A Maturity a S. Delivery.	38	38	37	40	39	57	26	32	 	40	40	30	36	
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	Age.	34	25	60 00	65	28	28	17	26	888	25	30	25	28	
	Reg. No.	3367	3429	3521	3663	3709	3757	3766	3820	3897	3977	4017	4199	4263	

### 3.—Hyperemesis Gravidarum.

There were 82 cases of hyperemesis gravidarum admitted during the year and of these 37 were primigravidæ and 45 were multiparæ; 7 cases, 3 mild and 4 moderate, had been under ante-natal supervision before admission. Thirty-seven of the cases were mild, 25 moderately severe and 20 severe. There were 4 deaths in the severe cases.

Of the 37 mild cases, 18 were primigravidæ and 19 multigravidæ. Nine cases were readmitted—2 on account of sickness and 3 because of hypertensive toxæmia. Spontaneous delivery occurred at term in one case, one case required forceps delivery on account of second stage delay, one case had a partial placenta prævia with spontaneous delivery and one case aborted.

In 3 cases spontaneous abortion occurred, curettage being performed in 2 cases afterwards. One case was repeatedly admitted because of habitual abortion and eventually had a spontaneous delivery at term.

Of the 25 moderate cases, 7 were primigravidæ and 18 multiparæ. There were 7 readmissions, one because of sickness and two because of repeated abortion, one for observation, one because of pyelitis and later for a normal delivery, one because of external accidental hæmorrhage, and one because of hypertensive toxæmia.

Of the 20 severe cases, 12 were primigravidæ and 8 multigravidæ. Three cases were readmitted because of sickness. Pregnancy was terminated in 4 cases by abdominal hysterotomy and 3 of them died, 2 with Wernicke's encephalopathy (see Nos. 177, 904 and 2760 under deaths). One case died of cerebral hæmorrhage (see No. 3482 under deaths). Two cases had spontaneous abortions and in one case pregnancy was terminated by dilation and curettage and in one by surgical induction at 31 weeks.

### 4.—LATE VOMITING.

There were 25 cases of late vomiting admitted during the year; 5 were primigravidæ and 20 were multigravidæ. Four cases were severe, 6 were moderately severe and 15 were mild.

In the severe group there were 2 cases of surgical induction of labour and spontaneous delivery, one forceps delivery and one classical exercian section. There were 3 maternal deaths (see Nos. 1543, 1635 and 4238 under deaths).

In the moderate group there were 2 cases of surgical induction with spontaneous delivery.

In the mild group there were no cases where labour was induced, but one case had a classical cæsarean section done at term for contracted pelvis.

There were two still-births. Nineteen infants were born alive, but two died later.

### 5.—Pyelitis and Pyelonephritis.

There were 97 cases of pyelitis and 4 cases of pyelonephritis admitted during the year. The following table shows the types in primigravidæ and multiparæ and whether they had ante-natal supervision at the ante-natal clinic or not.

Undelivered. Acute. Mild. Delivered. Primigravidæ (A) 5 3 9 12 15 17 10 10 15 Multigravidæ (A) 13 28 17 24

Pyelitis.

Labour was induced surgically in 7 cases and medically in 1 case. In one case pregnancy was terminated by cæsarean section after surgical induction as the maternal condition was deteriorating rapidly.

Three of the four cases of pyelonephritis were fatal (two were multiparæ). One case died following spontaneous delivery. Renal and ureteric calculi were found at post-mortem (see under deaths No. 428). One case died of cast obstruction of the kidneys and toxæmia following an incompatible blood transfusion (see under deaths No. 2101). One case died following spontaneous delivery (see under deaths No. 3825).

The fourth case was a primigravida who improved and was dismissed after 16 days in hospital.

# "FAILED FORCEPS" CASES.

During the year 1940, 21 cases were admitted after failure to deliver by forceps. Of this total 11 (52.4 per cent.) were primiparæ and 10 (47.6 per cent.) were multiparæ. There was 1 maternal death occurring under anæsthesia. There were 2 cases of puerperal sepsis, both of which were transferred to Isolation Hospitals.

In 9 cases the cervix was not fully dilated on admission. The occipito-posterior position was noted in There was one infantile death. One case was undelivered. In the cases where still-birth occurred, Of the infants born 8, or 40.0 per cent., were born alive and 12, or 60.0 per cent. were still-born. destructive operations were performed on 3 occasions. In 2 cases there was a prolapsed pulseless cord. 4 cases and contracted pelvis in 3 cases.

Remarks.			R.O.P. manual rotation. Head crushed by forceps before admission.	Delivery completed by Willet's forceps. Hæm., strep. Transferred to Isolation Hospital.	٩	Foetal heart not heard on admission.	Manual rotation.	Brow. Conversion to vertex. Forceps.	Manual rotation. Foetal heart not heard on	admission.		
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Result	M.	A	44		A	A	A	A	A		A	
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Remarks		Cleidotomy. Hæm. strep. Transferred to	A.R.M. on admission.	Prol. pulseless cord.		Prol. pulseless cord.  Hyp. toxæmia.	Uterine tear. Disproportion. Blood transfusion. Hyp. toxamia. No foetal heart	n. erated.	Craniotomy. Collapse under anæsthesia.	Hydrocephalus and spina bifida.	
livered Liter noission.	3 2	67	口 7C 8年4年		<b>*</b>	ひ 70 ユ 4ー ¢	¹ 4	<b>⊢</b> [c3		<del>ك</del> 4	
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### HEART DISEASE.

One hundred and fifteen cases of heart disease were admitted during 1940. Of these, 56 had been under ante-natal supervision at the hospital clinic. There were 3 maternal deaths. Two cases died undelivered (see Nos. 1030 and 696 under deaths). One case died following spontaneous delivery (see No. 888 under deaths). There were 3 still-births and 10 infantile deaths. There were 4 cases of pyrexia, giving a pyrexia rate of 3.8 per cent of cases delivered. There was one case of mild sepsis. In 57 cases (49.5 per cent.) there was a history of acute rhuematism or scarlet fever.

Tables showing type of cardiac lesion, mode of delivery, and results.

 $Category\ A\ (Total,\ 56).$ 

		ſ	Гуре (	of Les	ion.			I	Result	s.		sur.	,	
Mode of Delivery.	Auricular ibrillation.	Mitral.	rditis.	itral and Aortic.	ardia.	m ( )	Мо	ther.		Child	•	revious Acute Rheumatism.	Pyrexia.	Sepsis.
	Auricular Fibrillation	Mit	Myocarditis	Mitral Aort	Tschycardia	Total.	Α.	D.	Α.	S.B.	D.	Previous Rheum	i d	92
Spontaneous - Cæsarean section Forceps Manual breech - Abortion		24 2 7 2 1	6 1 - 1 - 1	5	_ _ _ _	35 3 9 3 1	35 3 9 3		33* 3 8 1	   	3 1 2* —	18 2 5 —	$\begin{bmatrix} 2 \\ \hline 1 \\ \hline \end{bmatrix}$	
Undelivered -  Totals -	   1	39	9	6		56	4  55	1	45		6	3	3	

^{*} Twins (once).

114

# Category B—Others (Total, 59).

		Т	ype of	f Lesic	n.			F	Results	s		cute		
Mode of Delivery.	ular ation.	ral.	rditis.	l and tic.	ardia.	,	Mot	her.		Child.	,	revious Acute Rheumatism.	Pyrexia	Sepsis.
	Auricular Fibrillation	Mitral.	Myocarditis	Mitral and Aortic.	Fschycardia.	Total.	A.	D.	A.	S.B.	D.	Previous Rheums	14	,
Spontaneous - Cæsarean section Forceps Hysterotomy - Abortion Manual breech - Undelivered -		25 4 3 5 3 — 4	7 - 1 1	5		37 4 3 5 5 1 4	36 4 3 5 5 1 3		32 4 2 — 1		3 1 - -	$\begin{bmatrix} 20 \\ 3 \\ 1 \\ 2 \\ - \\ 1 \end{bmatrix}$	1 - - - -	
Totals -	1	44	9	5		59	57	2	39	2	4	29	1	1

# Categories A and B (Total, 115).

Spontaneous - Cæsarean section Forceps Hysterotomy - Abortion Manual breech - Undelivered -		49 6 10 5 4 2 7	13 1 - 1 2 1	10	_ _ _ _	72 7 12 5 6 4 9	$egin{array}{c c} 71 \\ 7 \\ 12 \\ 5 \\ 6 \\ 4 \\ 7 \\ \end{array}$		65 7 10 — 2 —	$\begin{bmatrix} 2 \\ - \\ - \\ 1 \\ - \end{bmatrix}$	$\begin{array}{c c} 6 \\ \hline 2 \\ \hline \\ \hline 2 \\ \hline \\ \end{array}$	38 5 6 2 - 4	3	1
Totals -	2	83	18	11	1	115	112	3	84	3	10	57	4	1

Heart Disease.

A—Cases under Ante-natal Supervision at Hospital Chnic.

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Remarks	C.P. D.C. $4\frac{1}{8}$ ins. Auricular fibrillation.	<u> </u>	labour. (See under deaths.) Myocarditis. Surg. ind. A.R.M. Hyp. toxæmia.	Admitted in labour.	Second stage delay. Low forceps.  Surg. ind. A.R.M.  Surg. ind. A.R.M.	rditis. ind. rditis.	ar fibrillation.	Surg. ind. A.R.M.
Pyrexia or Sepaia.				1			<u> </u>	
Previous Acute Rheumstism	+	++	+   + +	+	+++	+	+	++1
ult	А	4	4444	A	4   Q 4	AAA	K	বৰৰ
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Mode of Delivery.	Forceps -	Spontaneous Undelivered	Spontaneous Spontaneous Spontaneous Spontaneous	Spontaneous	Forceps - Undelivered Spontaneous Spontaneous	Spontaneous Spontaneous Spontaneous Undelivered	Forceps -	Spontaneous Spontaneous Spontaneous
Orthopnæa		+	1	1	1111	1 1 1 1	1	
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Remarks			P.U.0.	Myocardius. Peri-odontal abscess.	Pyelit	Surg. ind. A.K.M.	Pyelitis (mild).	? Breech for examination.   Traing   Rr and V   Hvn tovenia	Lie with the stay I.			Anamia.	Myocarditis.	Surg ind A B M Breech.	ALIAN O ALIAN O OLIVINI	_		Mid-transverse arrest.	Late accentain.		toxæm	Surg. ind. A.R.M.		Low forcers on secount of maternal distress.	LOW IOTOSPA OIL GOODULE OI ILLUCOLILA ALSO COOL	
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Remarks	Auricular fibrillation. Complete abortion.  C.P. D.C. 44 ins.  Myocarditis.  Admitted in labour.  Myocarditis. Bronchitis.  Bronchitis. Transverse lic. Prol. cord.  Int. version.  Hyperemesis (mild).  Hyperemesis (moderate).  Myocarditis. Hyp. toxamia.  Surg. ind. A.R.M.  Surg. ind. A.R.M.  Chorea.  Chorea.  Hyp. toxamia.  Surg. ind. A.R.M.  Surg. ind. A.R.M.  Surg. ind. A.R.M.  Surg. ind. A.R.M.  Surg. ind. A.R.M.  Surg. ind. A.R.M.  Surg. ind. A.R.M.  Surg. ind. A.R.M.
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### MATERNAL DEATHS.

There were 65 maternal deaths during the year 1940. Thirteen (20 per cent.) of these were in cases which had been under supervision at the ante-natal hospital clinic and 52 (80 per cent.) were in cases which had not been under supervision. Of the total number of deaths, 19 (29.2 per cent.) died within twenty-four hours of admission, 20 (30.8 per cent.) died after twenty-four hours but within seven days of admission and 26 (40 per cent.) died after seven days.

Six cases were admitted after delivery at home and 13 cases died undelivered. Post-mortem examinations were made in 44 of the fatal cases.

Since there were 4,354 admissions to the hospital during the year the death rate was 15 per thousand (or 1.5 per cent.). The death rate calculated per 1,000 live births is 23.8. The death rates in the two categories were as follows:—

Category A, - - - - 0.7 per cent.

Category B, - - - 1.6 per cent.

There was one case which died of pulmonary tuberculosis while awaiting transfer to a sanatorium. She was admitted as a suspected pregnancy for investigation, but was found to be not pregnant. The patient was in hospital for two months. This case is not included in the above figures of maternal deaths.

Table showing causes of Maternal Deaths in 1940 in both Categories, and duration of residence in Hospital of these cases.

Cause of Death.	Under	24 hours.	Over 20 under	4 hours, 7 days.	Over 7	7 days.	Totals.
Cause of Death,	A.	В.	Α.	В.	Α.	В.	Totals.
Intercurrent Diseases—							
Pneumonia			2			2	4
Heart disease	1		1			1	4
Appendicitis		1				1	$\begin{bmatrix} 2\\2\\1 \end{bmatrix}$
Intestinal obstruction				2			2
Cholecystitis			_	-		1	$\begin{array}{ c c c c c } & 1 & \\ & -13 & \end{array}$
Complication of Pregnancy—							
Hypertensive toxemia -			_	1		2	3
Pyelitis						1	1
Eclampsia	1		1	1		1	4
Hyperemesis		1	_			3	4
Late vomiting			1	i —			1
Acute yellow atrophy of liver						2	$\frac{1}{2}$
Mixed and concealed						_	
accidental hæmorrhage -		4		1		1	6
Pyelonephritis		-	1			ī	2
Complication of Delivery—							-23
Placenta prævia						1	1
Retained placenta	1	3		1		2	7
Post partum hæmorrhage -		3		1		1	5
F.F.O		1					1
Malpresentation and mal-							
position		1	1	1			3
Ruptured uterus		2					2
Second stage delay—forceps			1				1
Contracted pelvis	_	<u></u>	_	<u></u>	2	1	3
Complication of Puerperium—							<b>—</b> 23
Septic endometritis				1		3	4
Peritonitis				2	_		$\frac{2}{-6}$
Totals	3	16	8	12	2	24	65

One case died of Pulmonary Tuberculosis, but was not pregnant, and is not included in the above table.

SUMMARY OF FATAL CASES DURING 1940.

A brief summary of each of the fatal cases is given in the following tables:—

1. INTERCURRENT.

Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
Late vomiting. Influenzal	460	28	4	В	37		

bronchopneumonia.

Obstetric history—three normal full-time pregnancies. Spontaneous deliveries of live children. Ante-natal care was undertaken by the patient's own doctor. She had been well until five weeks before admission when she felt sick and began to vomit continuously. She had severe frontal headaches during this period, and she had been very breathless and had slept poorly. On admission, patient was well nourished. The skin was dry and the face flushed, the eyes sunken, the tongue was dry and coated, and there was acetone in the breath. There was no jaundice and no cyanosis. T. 99.4° F., P. 120, R. 24. B.P. 120/80. Uterus eight months' size, vertex presenting. Pelvic measurements were normal. No abnormality was detected in the other systems. The urine was found to contain coliform bacilli only. The temperature was raised and varied between 98° F. and 101° F. On the day following admission (9/2/40) the patient was obviously distressed and there were signs of bronchopneumonia on the right side. M. and B. 693 was given by injection four-hourly. Fluids and glucose were given abundantly. A Kaolin poultice was applied and oxygen administered. On 10/2/40 the M. and B. 693 was discontinued and mustard leaves applied. Luminal 1 c.c. was given at night and whey and albumen water was prescribed. The sputum was found to contain mixed organisms, but tubercle bacilli were not present. Two raw eggs daily were prescribed on 14/2/40 and digitalin gr. 1/200 given hypodermically twice daily. The pulse rate remained elevated (100 to 160 per minute) and the patient died undelivered on 17/2/40. P.M. findings—signs of broncho-pneumonia.

R.O.P.
Manual rotation.
Forceps.
Pneumonia.
Pneumococcal
meningitis.

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Previous history—patient had had pneumonia six years and again three months before admission. Obstetric history—patient had had 10 normal full-time pregnancies with spontaneous deliveries of live children and one premature labour. The patient paid a visit to the ante-natal clinic on the day of admission and the respirations were noted to be rapid. The pulse rate was 100 per minute. She had been very breathless during the pregnancy and had felt weak. She had suffered from severe frontal headaches. There was no cyanosis jaundice oedema or deformity noted on admission. The patient was not dyspnæic and the heart seemed normal. There was dullness and diminished R.M. at the right base. There were numerous rhonchi and a few crepitant râles all over the chest. The patient remained fairly well but the pulse was always rapid and there were occasional rises of temperature to 99.4° F. On 7/3/40 labour was induced by artificial rupture of the membranes. After 22 hours' labour the vertex was manually rotated and the forceps applied. There was difficulty in delivery of the shoulders and the child was still-born. The pulse rate remained rapid and the temperature was elevated. There were signs of pneumonia of the right lung. On 24/3/40 she was very sick and became semi-comatose. She lay in an attitude of generalised flexion. The cerebro-spinal fluid was turbid and under pressure. Pneumococci were present. The coma deepened and the patient died on 26/3/40. P.M.—Bronchiectesis of right lung and superimposed pneumonia. Pneumococcal menengitis.

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S.B.

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
Anæmia. Lobular pneumonia.	history—well unt and ano months. Corpora large, pa wall. I lasting On 26/8 in ever commer running	one normal rexia. There is the first tion clinic. The stout wo wormal rapid there we have and accept on 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 december 28 decembe	al full-time we months re had been attended. On admonant tid spontare. On 25/vas a flare rising ag /8/40 as se while.	s. From the swelling of Rottenrov hission T. 9 where was contended a she of temperation on 25 where died at	monia in of ous delivery nen she had f face, hand we clinic on 7° F., P. 88 dema of face ery of twins complained ture to 101° 7/8/40. Blut patient of 3.20 p.m.	suffered fro suffered fro s and ankle 2/8/40, ro 8, R. 20. , hands and coccurred, of frontal F., settling ood transf died after in	m sickness s for three eferred by She was a abdominal the labour headaches. to normal usion was thad been
Influenzal pneumonia. Cardiac failure.	still-bor sickness Patient B.P. 13 by forc 4/11/40 and M. next da suggest condition	n child folls during property was well 5/90. Pat eps of a large, she was and B. 69 ay, and on ed that the	hothing of lowing modern conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the conditions of the condi	otor accident on admission had oedent into labour which did resulted in the condition of the was seen was an oor and she	bstetric hist at. Patient ssion T. 98 a of ankle spontaneou not live. T had some di not gradual n by a con influenzal c collapsed	had had controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled th	onsiderable 92, R. 20. minal wall as delivered er delivery, both lungs se over the vsician who Patient's
Cardiac. Acute cardiac failure.	Previous spontar cardiac of feet had be were n and or was ensounds was a uterus propper pale, the 130	s history— neous delived disease. He and she resident increasi thop neic. It is a systolic may systolic may systolic may be a cyanose the cyanose delivers.	eries. La light week ted in bed ngly seve mptoms. There was slightly teapid (120 armur at aonths' sized. On 1/ed. The	ignificant. st pregnances before adm. Cough we re during to On admiss marked ender. The per minute the apex at the per minute the apex at the per minute the apex at the per minute the apex at the per minute the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the apex at the	Obstetric I cy in 1936 nission the p as troubleso the previou sion she wa oedema of lungs were and only o and over the tient was p ad a sudder e rose to 10 onset of the	was composition to the legs.  the legs.  normal.  of fair qualities a collapse a collapse a collapse a collapse a collapse a collapse.	or full-time blicated by sed swelling eathlessness ths. There in, pinched The liver The cardiac sty. There is gion. The t diet and and became

Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
Mitral stenosis. Spontaneous delivery. Cardiac failure.	confined on exer pregnan hæmopt symptor 6 a.m. cyanose dyspnæ spontan remaine was of patient. digitalir	to bed for tion since to the dyspect three dyspects. 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Mitral stenosis. Myocarditis.	1935, two hospital (she had murmum and slight labour Binovum troubles was give better in the project of the project by night seems and slight labour better in the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project of the project	vo normal from 12/3 d previously at the aght cyanos by artificial lar twins some on 3 den morphing time, and f morphing	full-time of 3/40 to 19 y attended pex was noted in the second state of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second sec	s or opera uncomplicated (2/3/40 suffer el O.P.D.). noted. On of F., P. 92 of membra n spontanted patient camine on 4 collapsed in	ations. Obsted pregnar ering from B.P. 150/1 admission 2, R. 20. ones was careously on collapsed in the evenion 5/6/40.	stetric hist ncies. Pati- hypertensived 10. A rou- patient had Surgical in rried out of 31/5/40. On the eventient appearing and wa Patient had	ent was in e toxæmia gh systolic
Mitral stenosis. Acute pulmonary œdema.	Previous the hose detecte week being again a the measure and for distress	spital ante- d on routing efore admiss d was advi- ttended the embranes in or assistance	scarlet fratal cline examinates on she a seed to respect to the contract. She can be sent in	ever in chic on 15/8 tion. She ttended the t. On the and the ce was given she arrive for assistant	/39, but n made 14 at hospital on morning of ervix was to n omnoponed home hears. Studen	Patient firs o cardiac of tendances in account of admission wo fingers of $\frac{1}{3}$ , and or breathing the were se	t attended disease was n all. One breathless-the patient dilated and advised to g was very nt out and w the case

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
	coughin diagnose cyanose from he adrenali	g up copiou ed and an an d, cold and r mouth and ne were giv	ns blood-st mbulance d gasping d nose and en intrave	cained froth ordered. C for breath. I the pulse enously but	patient was Acute put admission Pink-ting was imperced the patient onary ceden	almonary of she was ured froth we eptible. Find died. P.M.	edema was aconscious, as welling we minims
Appendicitis. Peritonitis.	Previous children when sh ruptured 136, R. very dis dilated. glucose conditio	s history— —all forcep e was removed appendix 28. Patient stended and Patient's saline, 10 p	-nothing -nothing s deliverie ved to Gla removed it looked d there w condition per cent., worse an	of note.  s. Patient sgow Roya on 25/6/40 very ill and as slight si deteriorate was introdu	Obstetric had had go l Infirmary of admid exhausted ickness. The and an aced. Morndied at 10.	istory—six od health to and had a gission T. 10 d. The above os was to intravenous thine given	full-time ill 24/6/40 gangrenous 2·4° F., P. domen was two fingers as drip of General
Ruptured appendix abscess. Generalised peritonitis.	Previous through (spontar when shought single P. 72, I was ten pain an hæmorr was boutill 1/11 transfer Acetyle distensi On 3/1 abdomit 1/11/40 slowly deterior giving deterior and die abscess	s history—out pregnate ously). In the had pained since. R. 20. Patrick derness in the derness in the hage. The respondent of the last one of the last one of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the last of the l	l-nothing of ancy. If ancy. If Patient had not sich There was ient looked the right shees which emembrance was also given and the apparent on was less to and the apparent of temporal temporal temporal temporal patient orning of ed peritor.	of note. Of pelivery in ad been well sness. The sno dysurd well nour ide and loir nes were rules were rules along a continuous de and a continuous de and solusept en again from the solusept en again from the solusept went into 9/11/40.	bstetric his June of I till one we pain had ria. On addished and in Patient gnosed as ptured artically rose to 10 uous drip sa /40 there we as passed an glucose we asine and person 6/11/40, and as started over the coma on the P.M. exam.	story—1939 a full-treek before been localismission T. In good healtook acute concealed ficially and lition remains and glu as marked and patient as discontinuous discontinuous discontinuous patient then the patient of 7/11/40, we general the evening of Euptured.	o, sickness ime child admission sed in the 98.4° F., th. There abdominal accidental the child ined good atient was cose given. abdominal felt better. Inued and given from condition but while condition of 8/11/40 appendix
Late vomiting. Delayed labour. Acute intestinal obstruction.	Previou attende	s history— d an ante-	rheumatic natal dis	fever at pensary on	37 11 years of two occas, when she	of age. Pasions. She	atient had had been

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
	another restless tongue 11/5/40 given at at 11.3 ruptured was perintraver Vomitin At 5.40 balloone	attack. Cand in obvector. To there was 5 p.m., and 5 p.m. Order spontane formed became a second and soft	on admission ious pain; he pain; he pain; he complain and two pires at 12/5/40 ously. Or cause of the saline was a frequently controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the controlled the	on T. 100.6 the face value of epigase at sof intra- of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face value of the face va	days before F., P. 96, was flushed, cature settle tric pain. 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P the lips di ed on 10/ Morphine, ose saline vomitus r low forcep distress. A .m. morphi vas definite T. 102° F. M. exam.—	atient was ry and the 5/40. On gr. \(\frac{1}{4}\), was were given membranes of delivery At 3 a.m. ine, gr. \(\frac{1}{4}\). ly present. , abdomen —Intestinal
Intestinal obstruction. Peritonitis.	Previou and over all spon was pos were no and occa admission admission condition rupture commer 7.10 p.1 R. 32. saline, I much in rate was and repart 10.2 P.M. ex	s history— criotomy in taneous destrum her taneous destrum her taneous destrum her taneous. Patasional head on T. 98° lend on 6/9/4 need on 6/9/4 need on 8/9 need on 8/9 need on the pint, was approved.  s uncertain beated at in the pate of the pint, but the pint, was approved.	scarlet fe 1926. O liveries, in æmorrhage ient had lache. The hours bef F., P. 72, were no 40 at 8.15 /40 at 4 p took a r llapsed at given, foll At 7 a.m. and the atervals. it patient tinal obst	ver in 193 bstetric his cluding two e after 8th been fairly nere was a knore admiss R. 20. Shomorbid sign, and the igor at 7 pt. 4.30 a.m. clowed by blue T. 98.4° F. respirations Intravenous did not a state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the	37.  0 and appetory—nine of $4\frac{1}{2}$ months pregnancy.  well exceptorown discharges a sleep of blood little fluid e child was a small condition. 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Chronic cholecystitis. Localised peritonitis. Acute endocarditis. Septicæmia.	Previou normal first mis was coff noted to On 24/29/7/40 in Fow temperar F. at o	s history—full-time seed period fee-ground to be a well-7/40 intravel. The respective was eleath at 1	cholecysto pontaneou and active sickness for built wome venous glu pirations venous on. On evated. St. 1.20 a.m.	stomy in s delivery. e sickness for a short to the sickness for a short to the sickness was a sickness with the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of the sickness of th	1937. Obs Patient It rom 15/7/40 ime. On a health. T. given and 8 per minute was ver unconscious m.—Pocket endocarditis	tetric historial nausea o. On 23/dmission pa 97° F., P. was disconte. The pa ry drowsy s at 10 a.m of pus an	following 7/40 there atient was 80, R. 20. Itinued on atient was and the round gall

## 2. COMPLICATION OF PREGNANCY.

Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
Hypertensive toxæmia.	401	22	1	В	38		A
surgical induction A.R.M. Spontaneous delivery. Collapse after delivery.	doctor in morning pregnantime become on administration of the uter was not abnormable placents slight placents slight given in unconsequence improve patient electric	n September sickness det she began fore admission T. September and rus was full to in labour was relater more awas expensed awas expensed awas expensed at 7 ament, but was still in blanket ap	er. 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The eatient had $\frac{1}{2}/40$ ; at segiven. The remained Venesection ne temperat	tient had fir id two more is. When so f her feet and eadaches and 20. Patient feet and and rtex was pre- neasurement r systems. rupture of en. Ten he child, which and follow is was con- no further 9.30 a.m. 1 his was foll- high, 200/ or of 200 c.c. ure rose to ent died on	e visits. She was sevend ankles. Independent of the was very nkles. B.P. Its were no On 4/2/4 the member of the was appointed by bleeding, be pint of 20 owed by a 130. On 6 s. was perfectly was appropriately and the was appointed by a 130. 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Hypertensive toxæmia. Twins. Spontaneous and forceps delivery.	good he 160/100 T. 97° I was sli Twin I continu commen 5/7/40 at 12 I forceps glucose anæsthe again of 12 mid cold. sink an	ealth but for the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of	or occasion and a 20. Path of the a The bloomer, because was collapsed atin, following ain given and again ent because 2.20 a.m.	all swelling albumen, 3 cient had no ankles and od pressur ut there were a 4/7/40. First twin we given and at 1.45 p. 10 wed by a and placen rallied afterme semi-comine were a No P.M.	of eight year of ankles.  5 parts, Est complaints marked above remained above ere still not make the second two many blood transtate expresser another broad another broad examination.	High bloosbach. On sand felt word and felt word and felt word and complaint are suptured 6/7/40 at in delivered lied after infusion. At 5 polood transfed extremition at in the complaint control of the complaint control.	d pressure admission ell. Ther largement delbumes. Labour artificially 7.55 a.m. deasily bentravenous 4.50 p.m. m. patient fusion. A les becamentinued to
Hypertensive toxæmia. Twins. Breech and Breech. Manual delivery. Pneumonia.	Previou good, weeks and th	n's health bout she not before adm e feet and	nad been ticed a su nission. T legs were	good. Headden increa There was p	alth during ase in size one week well nourish	pregnancy of her abdo right hypo k. On ada	had bee omen thre ochondrium nission th

Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
	P. 76, 1	R. 18. The	ere was so	ome hydrai	nnios prese	ent; twin	oregnancy.

P. 76, R. 18. There was some hydramnios present; twin pregnancy. B.P. 120/80. Patient's blood pressure rose to 175/110 before delivery and albumen appeared in the urine. Labour began on 15/1/40 at 3.30 a.m. Delivery of premature twins, under chloroform, occurred at 7.15 p.m. The third stage was normal. P. 104 after delivery. On 16/1/40 at 8.30 p.m. she complained of dimness of vision and weakness. The pulse was of poor quality and albumen and blood were present in the urine. At 10 p.m. 200 c.cs., 50 per cent. glucose, was given intravenously. T. 102·6° F., P. 140. On 17/1/40 at 1.30 a.m. patient was barely conscious. T. 101·2° F., pulse 160 and of poor quality. Lumbar puncture was carried out and the cerebro-spinal fluid was found to be clear and under normal pressure. An intravenous glucose of 250 c.cs. was given, also prostigmine, 1 c.c., was given at 11 a.m. Patient was conscious and the breath sounds were moist. The secretion of urine improved after the glucose. On 18/1/40 there were signs of consolidation in the lungs and the patient became gradually weaker and died on 21/1/40. No P.M. exam.

Pyelitis.
Spontaneous delivery.

428 28 1 B 31 — SB

Previous history—nothing significant. Patient was well till six days before admission, when she became sick and complained of pain in the right lumbar region. There had been no dysuria, but frequency was present. On admission patient was noted to be a well built woman. There was no anemia or cyanosis. There was tenderness in the right loin and right iliac fossa. The tongue was dry and lightly coated. There was no cedema or deformity. The urine was examined and found to contain abundant pus cells and coliform bacilli. Kaolin poultices were applied to the kidney region. Potassium citrate was prescribed and copious fluids given. The urine did not clear up and Prontosil (Tabs. II t.i.d.) was given. On 25/2/40 the patient had a spontaneous delivery following a labour lasting nine hours. Although the temperature never rose above 100° F. the pulse remained rapid and in the region of 100 per minute, and the urine still contained pus cells and coliform bacilli. Suddenly on 7/3/40 the patient collapsed and died. No P.M. exam.

Ante-partum
eclampsia.
Spontaneous
delivery.
Cast
obstruction of
kidney tubules.
Early
pyelonephritis.

901 34 3 B 38 — SE

Previous history—nothing significant. Obstetric history—1934, pregnar

Previous history—nothing significant. Obstetric history—1934, pregnancy complicated by eclampsia, child still-born. 1936, normal full-time pregnancy, spontaneous delivery. There were no toxic symptoms during the pregnancy until a few hours before admission. On the evening before admission she complained of severe headache and severe abdominal pain. She vomited copiously, coffee-ground material and had three fits before admission. Morphine, gr. ½, was administered. The patient was slightly jaundiced and the liver was tender. On admission the patient was very excitable and the face was flushed and the skin moist. There was no cedema. B.P. 160/80. The urine contained albumen, 7 parts Esbach. The uterus was full-time size and the vertex was presenting. The feetal heart was not heard. The patient had a fit lasting  $1\frac{1}{2}$  minutes and was unconscious for  $1\frac{1}{2}$  hours. She was given

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
	1.	1 0-	20 0 C	50 nor con	t mag gul	nh solution	Twelve

morphine, gr. \(\frac{1}{4}\), and 2 c.es., 50 per cent. mag. sulph. solution. Twelve hours after admission she was delivered spontaneously of a 5\frac{3}{4} lbs. child. In the puerperium the urinary output was very low and during the first five days the patient passed only 11 ozs. urine. 50 per cent. glucose was given intravenously daily. A venesection was done and 400 c.c.'s blood withdrawn. Hot stupes were applied to the kidneys. The urine contained abundant pus cells and B. coli. On 5th day of the puerperium she complained of nausea and later of headache. The urinary secretion increased to 11 ozs. on the 7th, and 18 ozs. on the 8th day, but the blood urea rose steadily. The patient became restless, mentally confused and died on 9th day. P.M.—Cast obstruction in the kidney tubules; early pyelonephritis; old eclamptic lesions in the liver; recent healing eclamptic lesions in the liver.

Intrapartum eclampsia.
Death under anæsthesia.

2467 | 20 | 1 | A | 39 | — | A

Previous history—paratyphoid in 1937. Patient had had sickness in early months and swelling of the ankles for the last three weeks. There was headache during the last two weeks but no eye signs or symptoms. On admission T. 97° F., P. 76, R. 20. There was some ædema of face and ankles on admission. B.P. 180/120. The pains commenced at 11.15 p.m. on 18/7/40 and the progress was normal. Morphine and hyoscine were given at 2.30 a.m.; at 12.30 p.m. the patient took an eclamptic fit lasting two minutes. B.P. 160/120. At 1.5 p.m., while being induced with an anæsthetic she had another seizure. At 1.15 p.m. she collapsed and failed to respond to methods of resuscitation. Meanwhile the child was extracted by forceps which had been applied before the collapse. No P.M. exam.

Post-partum eclampsia.

3663 | 32 | 5 | B | 40 | — A

Previous history—nothing of note. Obstetric history—four normal full-time spontaneous deliveries. Patient's health had been good during pregnancy, but she was said to have high blood pressure at local clinic and had been recommended for admission to a Corporation Hospital, but would not go in. Patient went into labour and was delivered at home of a normal full-time child. The labour was normal, delivery at 11.45 a.m. and the nurse and student left house at 1.45 p.m. About one hour later patient apparently took a fit and then two more before help was summoned and she was admitted to hospital at once. On admission T. 98·4° F., P. 128, R. 18. Patient was a thin, pale woman in coma. She had repeated fits (seven in all), getting more severe despite repeated morphine and intravenous sucrose solutions. Patient took a severe fit at 9 p.m. and went into deep coma and died at 9.45 p.m. P.M. exam.—Early broncho - pneumonia; subendocardial hæmorrhages; no cerebral hæmorrhages.

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
Eclampsia. Utero-renal apoplexy.	before a headach and the blanket vision be She had hemore next da destruct given he in the edespite deterior was stated	admission, les. On ad legs æden on admiss lurred. Sh l other sev hage. Men by the cerv live operation alf a pint of vening of 2 sponging. ated steadi	when she mission T natous. Properties that the nation of the properties that the nation (perform the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the p	had breath 97° F., P. Patient was 28/11/40 to first fit at 2 at night an ere artificially dilated. The temper continued to evening, d not respective.	ient had be hlessness, we 96, R. 20. put on fluithe patient .50 p.m. and d showed stally rupture. The child traction atture, which or rise and 29/11/40, and to intract. exam.—U	The face ds and given was sleep d was given igns of an ed at mid was delivered the patch had starwas 105° F. patient's avenous sa	feet and was puffy en electric y and the morphine. accidental night and ered by a tient was ted to rise at death, condition line which
Hyperemesis gravidarum. Abdominal hysterotomy. Wernicke's encephalopathy.	severe sand occupation but of P. 96, I was dishyperent mouth drinks, bile in the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation below the sand occupation	s history—sickness sinital heads good colouds. 20. Patsinclined the sinclined the sis, and no washes. It oz., given the surrounding 1/21/40, under formed. 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Hyperemesis gravidarum. Abdominal hysterotomy.	Previous weeks be The sich meal. 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Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
	oxygen perform	and vines ed. About e and the n deteriora	thene an one hour e pulse	esthesia, a before the was almos	n abdomu operation th t impercer	On 23/3/40 hal hysterone patient habitible. The er the opera	ad become patient's
Hyperemesis gravidarum. Wernicke's encephalopathy.	Previous severe of food for R. 20. The must be severe of food for R. 20. The must be severe of food for R. 20. The must be severe of food food food food food food food	s history— yomiting for three week The patie three week tous memb s were crace en and no s 8/40 she 8/40 patien tucose, was dition had of paralysis the roused.	-appendice or last few as before a nt was a oranes were eked. On ickness for had visus at lost con given interiorate and squir	ectomy three vectomy three vectomy three dimension.  thin wome the bright recently allowed. Recently alloweds alloweds the bright recently allowed by the bright were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were not were	ee years agd had been On admission with a condition of the travenous ectal salines momentaria. Her vision was perfected. She on steadily	go. Patient unable to on T. 97.6° drawn and ongue dry a glucose salit were given hæmorrhally and 1 pion was very rformed. (was unconsideteriorated) heart and	take solid F., P. 100, tired face. Ind furred face. In pint, thereafter. ges noted. Int, 20 per poor and 26/8/40 scious, but id and she
Cerebral hæmorrhage. Hyperemesis gravidarum.	Previous full-time well from T. 99.8 looking with glooking reased.	l history— le pregnan le pregnan le F., P. 1 le The tor lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- lucose four- l	-nothing cies, sportiod and lado, R. 20 ague was hourly, are the patitive respiration of the patitive establishment.	of note.  ntaneous dentaneous den	Obstetric eliveries. It is ck for five was hollow patient was 0/40 an incline was green tonic going for that time	history—the Patient had weeks. On T-cheeked as to given rec travenous go iven and go c spasm and a hour, but and the h	ree normal d not felt admission nd anxious etal salines ducose was ducose was despiration respiration eart failed,
Late vomiting. Toxæmia. Cæsarean section. Sterilisation.	Previous section development and be on 21/	of 5 lb. c ped severe came more /12/40. Or	-nothing hild. He vomiting severe. So admissing ated and	of note. (alth had be and lumba She was seen on T. 98.4° the breath	Obstetric heen good ti ar pain. To by the dis F., P. 120 was offensi	istory—1937 Il 18/12/40 he vomiting trict staff ar ), R. 20. I ve. Rectal on and sicks	, cæsarean, when she continued admitted Patient was saline and

Parity.

Category.

Pyrexia or Sepsis.

Child.

Maturity.

Reg. No.

Nature of Case.

Age.

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	general condition was very much better and she was able to refluids by mouth. She went into labour on 23/12/40 and cæsarean see was performed. Both children were still-born—one was macera Sterilisation was performed. Next morning, 24/12/40, patient colla and was given coramine at 6 a.m., followed by two pints of glucose stand more coramine, but the patient's condition steadily deterior and she died at 12 noon. P.M. exam.—Heart muscle thin and brolungs, basal congestion; liver, yellow and soft with some red dot mottle brain ædematous, otherwise healthy; uterus healthy.										
Obstetric acute yellow atrophy. Spontaneous delivery.	Previous doctor, two we associate was par or visus complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid complete florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid florid f	s history—seven visits eks before ed with a tially relieved all disturbate anorexial omplexion. 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On per cent., r cent., in as followed t 11 p.m. lesions of				
Acute yellow atrophy of liver.  Hæmorrhagic bronchopneumonia.	Previous full-time noticed dispensation urine insulin, On 29/11.30 punits in pulse rate Cheyne 30 per second line deep and line	s history— e pregnancy yellowing ary—T. 974 e. On 26/6 were given a 6/40, at 2 .m. stuporous lin, were atterose. On Stokes respondent, was go coma. A mbs. She of liver, of	chorea aby. Patients of conjunction of conjunction with the p.m., patients and 30 given. On 1/7/40 piration with 9 p.m. died at	t 14 years.  nt had bee nctivæ. Pa 92, R. 20, 3.5 parts E ient becam 00 c.cs., 50 On 30/6/40 0, at 10 a.m as present. 8 p.m. T. 1 she had a 1.45 a.m.	B.P. 120/cent. glucosbach and be irritable per cent. general com., she was Continuou 02·4° F., P. chronic span 2/7/40.	history—cil 18/6/40, ted on 25/65. Album se saline ar ile present i and scream glucose salindition impedeeply consintravences intravences intravences from 144, R. 24, and right P.M.—Ac					

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
Mixed	627	30	4	В	28		SB
accidental hæmorrhage.	Previous	s history—r	$ abla_{ ext{nothing sig}} $	nificant.	Obstetric his		

Spontaneous delivery.
Bilateral cortical necrosis.

Previous history—nothing significant. Obstetric history—three pre pregnancies, all complicated by kidney trouble. All children were born alive. Last pregnancy, 1939, was complicated by external accidental hæmorrhage. During present pregnancy ante-natal care was undertaken by local authority clinic. For one month before admission she suffered from swelling of feet and ankles, severe headaches and spots in front of the eyes. She had a hæmorrhage three hours before admission and collapsed. Pains in the back were present at that time. On admission the patient was pale and collapsed, the pulse was of very poor volume, and the skin cold and clammy. The uterus was seven months size. The urine contained albumen, the blood pressure was 70/50 and labour pains were occurring every seven minutes. No abnormality was noted in the other systems. Spontaneous delivery occurred  $1\frac{1}{2}$  hours after admission, of a  $4\frac{1}{4}$  lb. still-born child. Severe hæmorrhage followed delivery and a blood transfusion was given immediately. The patient's pulse was good and she seemed fairly well after the transfusion. On the day of admission she passed 60 ozs. urine. On subsequent days 4,  $2\frac{1}{2}$ , 3,  $\frac{1}{2}$  and finally 0 ozs. of urine were passed. Intravenous glucose in saline, soda bicarbonate, and finally a continuous drip glucose saline were given, but the kidneys did not act. The skin was encouraged to act by an electric blanket. The patient died on the 7th day of the puerperium. P.M.—Not granted.

Concealed
accidental
hæmorrhage.
Spontaneous
delivery.

1275

utero placental apoplexy.

Previous history—nothing significant. Patient had been attending a Corporation ante-natal clinic and had been well until three weeks before admission, when she developed ædema of ankles and face. She noticed dimness of vision for one week and had a severe frontal headache for one day before admission. She lost consciousness on the morning of admission and was very confused and restless on the arrival of the out-door house surgeon. Omnopon, gr.  $\frac{1}{3}$ , was given and admission arranged. On admission patient was shocked and pale. The uterus was full-time size and the vertex was low down in the cavity of the pelvis. The feetal heart was not heard and the uterus was very tense and tender. patient was not having labour pains. B.P. 100/55. The urine contained much albumen. Morphia, gr.  $\frac{1}{4}$ , was given at 2.50 p.m.; 300 c.cs., 20 per cent. intravenous glucose and morphia, gr. \(\frac{1}{4}\), were given at 9.15 p.m. The patient was drinking well and passed 21 ozs. urine before midnight. On 12/4/40, at 3.15 a.m., the patient was delivered spontaneously of a still-born child and 10 ozs. retroplacental clot was passed with the placenta. At 4.30 a.m. she suddenly collapsed; pulse 130 per minute, poor volume. Electric blanket was applied and oxygen administered. Breathing was irregular and very slow and shallow. Stimulants were given, but the patient died at 5.5 a.m. P.M.—Gross

SB

N	lature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
	idental æmorrhage.	2994	29	6	В	36	_	_
	tetric	Previous	history-	$-{ m nothing}$	of note. (	)   bstetric	history—five	full-time

Previous history—nothing of note. Obstetric history—five full-time normal deliveries. Patient had been well throughout pregnancy till four days before admission, when she took some bleeding. More bleeding occurred on day before admission. On admission T. 98° F., P. 104, R. 20. She was pale on admission but in good condition. At 10.50 a.m. membranes were punctured. At 11.30 a.m. patient collapsed, but rallied after a small blood transfusion. She collapsed again at 2 p.m., but did not respond to further transfusion. Eschatin was also given at this time. There was no evidence of bleeding externally.

Breech.
Manual
delivery.
Mixed
accidental
hæmorrhage.
Obstetric
shock.

shock.

3379 | 44 | 14 | B | 32 | — | SB

Previous history—nothing of note. Obstetric history—12 normal fulltime spontaneous pregnancies, including twins on one occasion, and one seven months spontaneous still-birth. Health good, but two months before admission the feet became edematous. Bleeding started two hours before admission. Patient was shocked on admission and the vagina had been packed with gauze. T. 97° F., P. 128, R. 22. There was marked ædema of both legs and the uterus was very tense and tender. Morphine, gr.  $\frac{1}{4}$ , was given on admission and the usual shock treatment. Packing was removed from vagina and the membranes punctured. Pituitrin was given at 4.30 p.m. and the child was born at 9.40 p.m. by easy manual delivery of the head. The placenta was expressed and showed marked hollowing. The fœtus was macerated. The pulse was good, regular and full till 10.30 p.m., when there was a sudden collapse and the pulse became imperceptible. Artificial respiration and blood transfusion was commenced. The breathing returned and the pulse became perceptible, but was soon impalpable again. Death occurred at 11 p.m. P.M. exam.—True uterine apoplexy, with hæmorrhages through mucosa. There was a two-inch tear running up from the cervix, but not completely through muscle; ½-pint blood-stained fluid in the pelvis.

Concealed
accidental.
hæmorrhage.
Obstetric
shock.

3755 32 B 26 — — —

Previous history—nothing of note. Obstetric history—1933, eight months' pregnancy, ante-partum hæmorrhage and still-born child; 1934, seven months' pregnancy, ante-partum hæmorrhage and still-born child. Patient had been well until two weeks before admission, when her face and ankles became swollen and she developed lower abdominal pain on 11/11/40. On admission T. 97.4° F., P. 78, R. 20, and the patient was very pale. The uterus was tense and firm and there was no fætal heart detected. Morphine, gr. \(\frac{1}{4}\), was given. She complained of a dull ache in the lower abdomen. External hæmorrhage showed about 11.30 a.m. Morphine was repeated, but patient suddenly collapsed and died at 6.40 p.m. P.M. exam.—Uterine apoplexy; early cortical necrosis.

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
Concealed accidental	3670	41	12	В	38	_	
hæmorrhage.	Previous	s history—c	chronic rh	eumatism.	Obstetric	history—ter	$\mathbf{n}$ full-time

Previous history—chronic rheumatism. Obstetric history—ten full-time spontaneous deliveries and one two months abortion. Patient had had sickness for first three months with occasional headaches, but no eye or urinary symptoms. On day of admission she felt very weak following bowel movement. On admission T. 97° F., P. 84, R. 18. Patient was very pale and the skin was cold and moist. There was tenderness in the abdomen, but no rigidity. There was no external bleeding. Morphine was given at once on admission and the shock blanket was applied. Condition improved at first, but rapidly deteriorated. P.V. examination revealed the cervix two fingers dilated, but the fœtal parts not pressing on the os and membranes not tense or bulging. There was no blood staining. Patient suddenly collapsed while an intravenous solution was being prepared and did not respond to coramine or artificial respiration. P.M. exam.—Concealed accidental hæmorrhage.

Severe
anæmia and
pyelonephritis.
Cast obstruction
of kidney
tubules.

Obstetric

shock.

2101 | 29 | 3 | A | 35 | P | SB

Previous history—appendicectomy in 1937. No fevers. Obstetric history—1928 and 1938, two normal full-time spontaneous, uncomplicated pregnancies. Patient had been anæmic for some time and was very breathless for five days before admission. There was ædema of legs. A blood transfusion was given but, unfortunately, the blood was mismatched. Sodium bicarbonate and saline were given at once and repeatedly, also glucose saline. Spontaneous premature labour occurred on 20/6/40. The child was lying in the transverse lie and internal version was performed. On 21/6/40, 400 c.cs. of compatible citrated blood were given. Urinary output was very scanty and loaded with pus and hæmoglobin from 19/6/40. Patient steadily declined and died on 23/6/40. P.M. exam.—Hæmoglobin cast obstruction of kidney tubules; old pyelonephritis; scattered small areas of necrosis of liver and two areas in pituitary.

Hypertensive toxæmia.
Pyelonephritis.

3825 | 43 | 4 | B | 36 | S | -

Previous history—no illness of note, but on waiting list of Western Infirmary for past year for recurrent appendicitis. Obstetric history—1921, normal full-time delivery; 1926, three months abortion; 1936, six weeks abortion. Patient had had phlebitis of left leg in June, 1940, and had felt "poorly" throughout pregnancy. The right ankle had been swollen from August. There was some visual disturbance and headaches at times. There were marked varicose veins of legs. On admission T. 97·2° F., P. 120, R. 22. She was a stout woman of good colour. There was cedema of both ankles. B.P. 138/94. No albuminuria. Premature labour occurred on 29/11/40, following administration of pitocin on 29/11/40. Interpartum temperature 103° F., P. 130 on 29/11/40. The lochia was scanty and foul-smelling. Cervical smear showed staphylococci and urinary examination showed non-hæmolytic streptococci. Urinary output was scanty after delivery despite esmodil and intravenous glucose. Patient took a rigor on 2/12/40 and again

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.					
	she had kidney. saline w	on 3/12/40, and thereafter her temperature was remittent. On 4/12/40 she had complaint of pain over right loin and slight tenderness over the kidney. Intravenous salines were continued and a continuous drip saline was acting from 5/12/40. Patient died at 12.20 p.m. on 6/12/40. P.M. exam.—Not granted.  3. COMPLICATION OF DELIVERY.										
Bilateral cortical	2147	39	11	В	40	_	SB					
necrosis of suprarenal. Lateral placenta prævia. Surg. ind. A.R.M. Spontaneous delivery.	Obstetr: January had ha mid-May cedema she blee induction child was was co repeated at 6 a.s. collapse exam.—	ic history, 1920, and slight voy, which poor ankles. In thereafter on of labour as born on implaint of ally. On 2 m and the dowith signs in the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the signs of the sign	ten for definition of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the seco	ull-time s ry, 1937—e roughout On admis had examin l condition formed. P On 28/6/4 ion. Coran travenous mproved sl irations an ecrosis of s	pontaneous ight childred pregnancy sion T. 98° ed her on was good. ains started to the color ine and of glucose salightly. At ad she died uprarenal;	deliveries and painles F., P. 84, day of adn On 25/6/4 or was poor omnopon wine drip was a.m. she at 9.10	between g. Patient ss bleeding R. 20, and hission and 40 surgical 40 and the c and there were given was started e suddenly a.m. P.M.					
Hydramnios. Spontaneous delivery. Retained placenta. Death under anæsthetic.	Previous well du There was sudde Patient T. 97° I of poor months 17/1/40 were rup.m. m the pla anæsthe patient	s history—ring pregn vas swelling n increase i was very F., P. 80, R quality. gestation. at 12.25 p ptured. Norphia, gr. centa was esia. Indu- stopped b	scarlet fer ancy exce g of feet for n the size small, the . 20. Slig Abdomen B.P. 14 o.m., unde discarriage \(\frac{1}{4}\), and pi still retain extiction with oreathing.	ver at 14 m pt for sligh or three we of the abdo in, unhealt tht ædema of tense and 45/100. Fe r gas, oxyge (incomple- tuitrin, 0.5 ned and it chloroforn All efforts	anonths. Nont sickness eks before a men four why looking of the ankle tender and arriet Americal occurred was decided anæsthesis at resuscital pyeloner	o fevers. If in the ear admission. The ear and of possible states and of possible states. Heart's was the size on. Cit. It is thene, the lat 5 p.m. given. At do remove a was beguntation failed.	Patient was ly months. She noted admission. oor colour. ounds were ze of seven given. On membranes a. At 6.30 p.m. ye it under in, but the					
B.B.O. Retained placenta. P.P.H. Blood transfusion.	Patient —force had be	had had go ps delivery en well du	ood health with obs	. Obstetric shock regnancy.	40 c history—c c, and lobar The child v There had	one previous pneumoni vas born at	s pregnancy a. Patient t 9.30 a.m.,					

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.			
	supervision. When she was seen by O.D. house surgeon, patient was very shocked, though there was only a moderate amount of hæmorrhage. The pulse was imperceptible at wrist, and breathing sighing. The fundus was soft and would not firm up, and ½ c.c. pituitrin was given. Patient was admitted to hospital, placenta in situ and patient still very shocked. Morphia, gr. ¼, strophanthine, gr. 1/100 given. Blood transfusion given and electric blanket applied. Patient was pale and restless, skin cold and clammy. She did not respond to transfusion and died at 1.40 p.m. P.M. exam.—Obstetric shock; active tuberculosis in right lung.									
B.B.O. Retained placenta and P.P.H. Blood transfusion. Obstetric shock.	Previous full-time months clinic. a.m., the number was in hospital and the R. 24. c.es. bl	as history— a pregnance a bortion. The gener he child wa rse arrived situ. She l at 10.25 a e skin was The place ood was fo	no fevers y, spontar Patient al health s born spo the patier was seen .m. On a covered enta had llowed by	and no opneous delived had had been sontaneously at was have by the O.I. admission the with cold not separate 400 c.cs. s	do perations. Overy of a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and a literation and	Obstetric hive child an care by the On 2/2/4 nurse arriverhage. The geon and a ras very show of transfus renously.	story—one d one four he hospital 40, at 7.45 ed. When he placenta dmitted to ocked, pale, F., P. 136, ion of 800 The patient			
Persistent bleeding. Surgical induction of abortion. Placenta accreta. Acute sepsis.	did not respond and died at 1.15 p.m. P.M. exam.—Signs of obstetric shock.  \[ \begin{array}{c c c c c c c c c c c c c c c c c c c									

Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
Manual removal of placenta.	1674	29	5	В	42		A
Obstetric shock.	Previous	s history—	$_{ m nothing}^{ m l}$ of	note. Ob	stetric hist	ory—manu	al removal

hypostatic pneumonia.

30

2276

Previous history—nothing of note. Obstetric historyof placenta and blood transfusion with second child in 1935 and again after her fourth child in 1939. Good health throughout pregnancy. Attended Corporation ante-natal clinic. On 10/5/40, at 11.30 p.m., labour pains began but were poor. On 13/5/40, at 12.45 a.m., patient was admitted to the hospital as a case of delayed labour. T. 98.4° F., P. 100, R. 20. B.P. 120/70. On 13/5/40, at 2.25 a.m., spontaneous There was much bleeding thereafter and the placenta delivery occurred. was retained. The patient was pale and collapsed. At 4 a.m. 800 c.cs. blood and one pint, 20 per cent. glucose saline, were given intravenously, while the placenta was removed manually under gas, oxygen and ether. T. 96·4° F., P. 160, R. 16. At 10 a.m. pulse was still poor, 140-150, and there was severe headache and slight icterus and conjunctivitis. Condition remained much the same throughout the day. At 5 p.m. continuous intravenous drip set up and one pint, two per cent. soda bicarbonate given and then five per cent glucose saline. On 14/5/40 condition unchanged. T. 103° F., P. 150, R. 40. Eight ounces urine were passed—very dark and contained blood and albuminous casts. Stomach distended and stomach tube passed, and much gas and fluid withdrawn. Prontosil given intravenously and one pint of sodium bicarbonate. On 15/5/40 T. 100·2° F., P. 140, R. 44. 62 ozs. of urine had been passed but there was no improvement of condition. Patient died at 11 a.m. P.M. exam.—Obstetric shock; cast obstruction of renal tubules;

Retained
placenta
(adherent).
P.P.H.
Blood
transfusion.
Manual removal
of placenta.
Obstetric shock.
Death under
anæsthesia.

Cast obstruction

of renal

tubules.

Previous history—nothing of note. Obstetric history—one full-time instrumental delivery in July, 1937. Adherent placenta. Health had been good throughout pregnancy and the child had been born outside at 10.10 a.m. on 3/7/40, her own doctor conducting the confinement. On admission the patient was very shocked and collapsed (at 12.15 p.m. on 3/7/40). Patient was given a transfusion of whole blood shortly after admission. Condition improved gradually, but patient was not considered fit for operative interference till after 4 p.m. Manual removal of placenta was commenced as the patient was starting to bleed again. The placenta was removed in three parts as it was firmly adherent. The patient collapsed at 4.50 p.m. and was given coramine intravenously, and this was repeated at 5.10 p.m., with adrenaline intracardiacly. Intravenous glucose and saline was commenced at 4.50 p.m. and artificial respiration given, but the response was only momentary and the patient died at 5.15 p.m. without regaining consciousness. P.M.—Not granted, but done by Crown Agent. Signs of obstetric shock.

B

Retained placenta.
Post-partum hæmorrhage.

2408 | 32 | 9 | B | 40 | — — — — Previous history—nothing of note Obstetric history—eight norm

Previous history—nothing of note. Obstetric history—eight normal full-time spontaneous deliveries. Retained placenta and blood transfusion after seventh child. Patient had had good health throughout pregnancy,

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
							<u> </u>

except for some ædema of fect and ankles in last month. Patient was admitted on 14/7/40 at 1.20 p.m. with history of passing small clot of blood at 4.50 a.m. The general condition was very good. Patient insisted on going home for confinement and she was thoroughly examined, but placental tissue could not be felt. She was sent home in labour with a nurse and a student. The child was born at 1.50 a.m. on 15/7/40 and delivery was followed almost immediately by a severe post-partum hæmorrhage. The doctor went out at once and decided that the patient was too ill to move without transfusion. The bleeding had now been controlled. A pint of whole blood was given intravenously and a glucose saline transfusion maintained till she was admitted to the labour ward and then another pint of blood was given. The placenta was manually removed at 4.30 a.m. while the patient was comatose. She improved after this and a continuous drip saline was maintained intravenously, but she collapsed and died at 6.15 a.m. P.M. exam.—Signs of bleeding.

B.B.O.
Retained
placenta.
P.P.H.
Blood
transfusion.
Placenta
expressed.

122 | 36 | 5 | B | — P | A

Previous history—nothing significant. Obstetric history—three full-time pregnancies (one twin pregnancy); all spontaneous—1927, 1928, 1931. One miscarriage, 1937. Ante-natal care by local authority clinic, ten attendances in all. Child born spontaneously at 4 a.m. after a two hours' labour, followed by post-partum hæmorrhage and collapse, placenta still in utero. On admission at 6.45 p.m., the patient was pale and collapsed. P. 140 per minute and of very poor volume. The skin was cold and clammy. The patient was comatose and unable to be roused and there was very slight vaginal hæmorrhage. At 7.10 a.m. (11/1/40) a blood transfusion was given with considerable improvement. At 8 a.m., under ether anæsthesia, the placenta was expressed. No further bleeding occurred and patient's condition after operation was good. On the sixth day of the puerperium the stitches were removed from the arm, when pus was found to be present and there was severe pain and evidence of lymphangitis. The local condition cleared up under treatment, but the patient ran an irregular and elevated temperature. On the 12th day signs of consolidation in the chest were apparent and a diagnosis of broncho pneumonia was made. M. and B. 693 redoxin and copious fluids were prescribed and stimulants were administered. Several small abscesses formed on the arms and legs and hæmolytic streptococci were grown on culture. The temperature varied between 97° F. and 103° F., and the pulse between 110 and 160. Rigors occurred at frequent intervals and the patient died on the 29th day of the puerperium. No P.M. examination.

B.B.O. P.P.H. Blood transfusion. 733 | 33 | 12 | B | 40 | — A

Previous history—nothing significant. Obstetric history—eleven f

Previous history—nothing significant. Obstetric history—eleven full-time normal spontaneous deliveries. Severe post-partum hæmorrhage after birth of last child 16 months previously. Patient had been apparently well throughout the pregnancy. She was delivered spontaneously after a labour lasting three hours, one hour before admission. She was said to have had a fit before admission. On admission the patient was semi-conscious, very blanched and cold, and

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
İ							

the radial pulse was imperceptible. The breathing was gasping in character, the uterus was bulky but firm, and there was evidence of some loss of blood. A blood transfusion of 800 c.cs. was given, but the patient did not respond and died three hours after admission. No P.M. exam.

High forceps.
P.P. Hæmorrhage.
Obstetric shock.
Blood
transfusion.

1134 23 1 B 40 — A

Previous history—nothing significant. Patient had been well throughout pregnancy and ante-natal care had been carried out by a Corporation clinic. Pains began on 30/1/40 at 12 midnight and membranes were unruptured. On admission the patient was well nourished and not distressed. There was no cedema and no deformity. B.P. 110/70. Pulse 85 per minute. The uterus was full-time size and the lie of the fœtus was longitudinal. The vertex, which was presenting, was above the brim. The patient was having first stage pains, occurring at fiveminute intervals. D.C.  $4\frac{3}{4}$  ins. The cervix was almost fully dilated and the membranes were ruptured. Morphia, gr. 1/4, was given at 2 a.m. on 1/4/40. The feetal heart and maternal pulse remained good. At 8.30 p.m. atropine, gr. 1/100, was given and under ether anæsthesia delivery was carried out. The head was lying in the transverse and a face and occiput grip was taken, but the blades slipped. The head was rotated to occipito anterior and the child was delivered by using strong traction. The child was resuscitated with difficulty. There was a brisk post-partum hæmorrhage and a blood transfusion of 800 c.cs. and  $6\overline{0}0$  c.cs. of 20 per cent. glucose was given. Morphia, gr.  $\frac{1}{4}$ , was given as the patient appeared very shocked. On 2/4/40 the patient was still very shocked, the pulse was rapid and of poor quality, and the B.P. 60/50. Percorten was given without effect. At 1.45 p.m. B.P. was 45/30. Hæmoglobin casts were present in the urine and Soda cit., 3.8 per cent., given intravenously. Patient became much worse and died. Child weighed 9 lbs. 13 ozs. P.M. exam.—Hæmoglobin casts present in the kidneys; small areas of necrosis in liver; uterus intact.

Retained
portion of
placenta.
Post-partum
hæmorrhage.
Incidental
eclampsia.

3113 | 26 | 1 | B | 40 | — | A

Previous history—nothing of note. Obstetric history—no history available from patient and parents did not notice any abnormality of health or hear of complaint from patient during pregnancy. Patient was admitted with history of eclamptic seizure. On admission on 14/9/40 patient was restless and showed marked generalised ædema. T. 97.6° F., P. 68, R. 20. There were no fits after admission. The patient was very restless despite morphine. On 14/9/40, at 8 p.m., forceps delivery of a live child was carried out, but patient was still restless. At 12.15 a.m. she suddenly collapsed and was given coramine, which was later repeated. At 1.45 a.m. lumbar puncture was done to relieve cerebral pressure, but the patient died at 2 a.m. P.M. exam.—Retained portion of placenta; post-partum hæmorrhage; incidental eclampsia.

			142							
Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.			
Post-partum hæmorrhage. Retained portion of placenta.	Previous history—nothing of note. Obstetric history—July, 1937, full-time instrumental delivery; April, 1939, $8\frac{1}{2}$ months spontaneous delivery of twins. Patient had been well throughout pregnancy. She was sent into hospital because patient was hysterical and unmanageable. On admission T. 97° F., P. 100, R. 20. Patient's general condition was good. A leg was projecting from the vulva and at 2.45 a.m. spontaneous delivery of breech occurred. There was a moderate post-partum hæmorrhage and placenta was therefore expressed by fundal pressure. Thirty minutes later there was moderate post-partum hæmorrhage, controlled by intravenous ergotrate. At 7 a.m. 300 c.cs. blood were given with much improvement. At 8.15 a.m. she collapsed and $1\frac{1}{2}$ pints of blood were given. The pulse and colour again improved. Collapse occurred again at 12 noon and patient did not recover. P.M. exam.—									
F.F.O. Perforation and forceps. Death under anæsthesia.	Al75  Previou out preattempt T. 98° I shocked was for lip of cowas not saline a On 17/I had impin mid-	of blood were given. The pulse and colour again improved. Collapse								

effect. No P.M. exam.

206

Breech.
Failed version.
Manual delivery.
Post-operative
collapse.

Previous history—no fevers and no operations. Patient attended the hospital ante-natal clinic on 10/1/40 when breech presentation was diagnosed and she was admitted on 17/1/40. Patient of small stature, but her general condition was satisfactory and her colour good. T. 97.8° F., P. 72, R. 20. B.P. 160/90. There was slight ædema of both ankles, but no albumen in the urine. The uterus was eight months size and the pelvis was normal. No abnormality was detected in the other systems. Patient had some sickness in the ante-natal wards on 18th and 19th January. External version failed under chloroform on 20/1/40. She went into labour on 21/1/40 and three hours later the breech was showing. Manual delivery of a  $6\frac{1}{2}$  lbs. still-born child occurred at 1.45 a.m. on 22/1/40. The delivery was easy and the third stage uncomplicated. After delivery the pulse was rapid and of poor volume. Four hours later she became critically ill and was very restless. Radial pulse was imperceptible. A vein was exposed and an intravenous glucose was commenced, but the patient did not respond and died during the administration of the intravenous glucose saline.

A

SB

	Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis	Child.
?	Rupture of uterus.	2691	40	11	В	40		SB
F	etal monster.	Previous	s history-	nothing	of note.	Obstetric	history—te	n normal

Previous history—nothing of note. Obstetric history—ten normal full-time deliveries. Patient had been in good health. External version for breech done on 7/8/40 by own doctor. She then complained of abdominal pain. Membranes ruptured later, and in an hour's time loop of bowel showed. On admission T. 97° F., P. 120. Patient was stout and flabby and very distressed. There was no ædema or deformity. The fætus was in the transverse position and there were very strong, painful contractions. There were several loops of bowel hanging down. The bowel was about 1½ ins. in diameter and congested and shiny. Laparotomy was performed for ? rupture of uterus as no fætal parts could be felt per vaginam. No evidence of rupture. A hand was passed into the vagina and the bowel tore and meconium escaped. With considerable difficulty a fætal monster was delivered. Patient rallied a little after operation, but later collapsed and died suddenly at 6.5 a.m. as an intravenous saline was being given. P.M. exam.—Signs of obstetric shock.

Obstetric shock.
Delayed labour.
Breech.
Manual
delivery.
Intrapartum
sepsis.

Manual

delivery.

4276 | 40 | 1 | B | 39 | — | SB

Previous history—nothing of note. Patient had had sickness in early months and again in December. Pains commenced 23/12/40. Episiotomy

months and again in December. Pains commenced 23/12/40. Episiotomy and attempted delivery had been made by own doctor outside. On admission T. 100.6° F., P. 144, R. 28. On admission patient was collapsed and smelling heavily of acetone. There was edema of ankles. No feetal heart was heard Two pints, 20 per cent. glucose saline were given intravenously one hour after admission and the general condition improved. General anæsthetic was given after premedication, with atropine, gr. 1/100 and morphine, gr. ½. Child, with extended legs, was delivered with considerable difficulty and weighed 9½ lbs. 30 c.cs. soluseptasine was given intramuscularly as there was a foul-smelling vaginal discharge. General condition was still poor some hours after delivery and 600 c.cs. plasma were given intravenously. The condition improved, but the improvement was not maintained. Morphine, gr. ½, was given at 6 p.m. and 11 p.m., also 40 c.cs. soluseptasine intravenously. The condition remained much the same throughout the night, but next morning it deteriorated rapidly, and despite morphine, gr. ¼, and eschatin, 10 c.c.s, patient died at 11.20 a.m. She was a little jaundiced at death. P.M. exam.—Liver—tiny reddish areas of necrosis; subendocardial hæmorrhages; subperitoneal fibroid, with plum-coloured mottling in centre; endometrium of lower uterine segment was foul-smelling and greyish-red in colour.

Shoulder
presentation.
Obstructed
labour.
Ruptured uterus.
Blood
transfusion.
Subtotal
hysterectomy.

14 | 39 | 7 | B | 38 | — | SB

Patient had been well during pregnancy. At 1 a.m. on the day of admission pains began and they were very strong. At 2.10 a.m. an arm prolapsed. At 5.10 a.m., after a very strong contraction, she felt an excruciating pain and fainted. Following this there were no contractions. On admission patient was very shocked and pulse imperceptible at wrist. T. 98° F., B.P. 58/46. The lips were blue, but there was no air hunger and no evidence of excessive blood loss. The skin surface

Parity.

Age.

Category.

Reg.

Nature of Case.

Pyrexia or Sepsis.

Maturity.

Child.

	was very cold ar lying obliquely womnopon, gr. $\frac{1}{3}$ , transfusion of 80 blood transfusion anæsthetic was complete rupture hysterectomy was again transfusion and died on $2/1$ , anæsthetic. Fisc	ith arm pro and percor 00 c.cs. give and the administered through the s performed. used—on the 1/40 at 2.20	lapsed. At ton, I c.c. en. There patient wal and the he lower see operating p.m. while	t 12.25 p.m., were given was slight as taken to abdomen segment of a condition table. Pastill under	a. atropine, en and als at improve o theatre. opened. I deteriorate tient did not the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influence of the influ	gr. 1/100, o a blood onent after A spinal of There was A subtotal of ed and she of respond of
Ruptured uterus. Peritonitis. Hydrocephalic child.	Obstetric history deliveries. Paties when she had positive pituitrin, three thereafter and the commenced and deterioration of T. 100·2° F., P. I cold and clammy dehydrated. The slight jaundice, the intravenous glucous drip thereafter. rapid deterioration ruptured uterus.	y—1936 and that been lyuria. Lable c.c. doses, he patient for con 25/7/40, her general 20, R. 24.  There was a mainge of sking of skings of skings of skings condition recognition recognition.	nd 1938, n well untrour started on 23/7/40 elt well. Condition Patient ap as frequent arked odou and conjunct 7 a.m remained th	normal fill two weed on 22/7/40. The part of aceto inctiva. (a., and five the same till two weeds are of aceto inctiva.	ull-time speks before 40 and she ins stopped continuous sudden consision at y ill and the had she apped in the lone pint 20 per cent. Il 11.45 a.m.	admission, was given admission, was given and suddenly suddenly suddenly suddenly suddenly suddenly and 5.40 a.m. as eared very breath and per cent. continuous a., when a
Slight hydramnios. Second stage delay. R.O.P. Forceps. Shock.	Previous history full-time instrum ante-natal care a but for slight gen B.P. 120/80. Parengaged, though ruptured at 8.30 2.15 p.m. and the dilated. At 5.15 delay in the secont An intravenous prepared, free a from lacerations bleeding ceased. Position and was packed to prevent after delivery where the secont and the secont and the secont and the secont and the secont and the secont and the secont and the secont and the secont and the secont and the secont and the secont and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the seco	mo fevers ental delive t hospital cla heral weakne atient lookee slight pains a.m. on 8/ e vertex was p.m. forcep ad stage and glucose was bleeding was bleeding was there. The head easily delive t further ble tas satisfact ad anxiety. ed. At 8.40 started alm ofte coramin	s or oper ries with hinc—eight ess. On add fit; the had been possible for then in mines delivery because the salso stars noted from the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated for the lacera was rotated f	ations. Ollive childred visits—and live childred visits—and limission T. Vertex was resent for I lient was edopelvis and was commerced was forced. While the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the community of the co	bstetric his en. Patien 1 was well 1 97° F., P. as presenting 16 hours. It is a patient be a sutured by to occipilly to occipilly to occipilly the vagina patient shows 1. Maternal patient shows 25 p.m. Note that is a patient shows 25 p.m.	story—two t had had throughout 80, R. 20. Ing but not Membranes aginally at ax was fully tuse of the P. position. was being the urethra, and the atto-anterior was lightly I condition owed some and blood and blood on steadily to bleeding

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.	
C.P. Surg. induction.	1217	25	1	A	38	s	A	
Cæsarean section.	Previous by hosi	s history—i pital ante-i	nothing si natal clini	gnificant.	Ante-natal 5/3/40. Pa	care had l	l Deen given Deen well	

Previous history—nothing significant. Ante-natal care had been given by hospital ante-natal clinic from 16/3/40. Patient had been well throughout pregnancy. She was noted to have a contracted pelvis, D.C. 4½ ins., and was admitted for induction of labour. On admission T. 97° F., P. 80, R. 20. B.P. 130/80. The patient was a well-nourished woman of small stature. The uterus was 38 weeks size and the vertex was presenting, but not yet engaged. There was slight disproportion. On 7/4/40, at 12.10 p.m., she was examined under chloroform anæsthesia and it was decided to induce labour. Membranes were punctured with a male catheter and 7½ ozs. of slightly greenish liquor withdrawn. Before the onset of labour there were signs of acute feetal distress. At 11.15 p.m. classical eæsarean section was performed under ether anæsthesia—child alive. On the second day of the puerperium, temperature was elevated to 103° F., P. 150 per minute. M. and B. 693 (two tablets) were given four-hourly. The temperature remained elevated and the pulse rapid A pure growth of staphlycoccus was obtained from the cervix. M. and B. 693 was given intravenously. Abdominal distension became marked and the patient died on 15/4/40. P.M. exam.—General peritonitis.

C.P.
Death under
anæsthesia.
Cardiac collapse
due to
chloroform.

3018 | 40 | 6 | A | 38 | _ _ _

Previous history—nothing of note. Obstetric history—four full-time pregnancies, one spontaneous and three instrumental deliveries. One 6½ months miscarriage. Health had been good throughout pregnancy till she took acute pain on left side on 3/9/40. On admission T. 97° F., P. 80, R. 20. Patient was in good health, but pale, and had some ædema of ankles. Contracted pelvis, D.C. 4 ins. Breech presentation; external cephalic version was performed on 11/9/40, followed by surgical induction, artificial rupture of membranes. On 12/9/40, at midnight, labour commenced, but maternal and fætal distress became apparent and a cæsarean section was deemed necessary. The abdominal incision was just made when the patient suddenly collapsed and failed to respond to artificial respiration. P.M. exam.—Marked atheroma of coronary arteries.

4474 | 36 | 1 | B | 29 | — | A & A

Twins.
C.P.
Spontaneous
delivery.
Post-operative
collapse.

Previous history—appendicectomy; no fevers. Patient had been well during pregnancy until two weeks before admission when she had severe pain under the right costal margin. She attended the ante-natal clinic on 28/12/39 and was admitted to hospital. Contracted pelvis (D.C. 4 ins.) and a twin pregnancy was diagnosed. The patient was pale, thin and under-nourished. T. 98° F., P. 80, R. 22. B.P. 135/80. There was no albumen in the urine; no abnormality was detected in the other systems. Patient went into labour on 9/1/40 at 3.30 a.m., and spontaneous delivery of twins occurred after a labour lasting 5½ hours. After delivery pulse was 132 per minute. On 10/1/40, at 2 a.m., the patient became breathless and her pulse was of very poor volume. Brandy and glucose were given, with some improvement. At 5.45 a.m. pulse became imperceptible. Coramine, 1·7 c.c., morphia, gr. ¼, and atropine, gr. 1/100, administered. At 6.30 a.m. the patient became unconscious, respirations were sighing and radial pulse imperceptible. Percorton, 2 c.cs. was given, but there was no improvement and the patient died at 7 a.m.

## 4. COMPLICATION OF PUERPERIUM.

Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.		
Spontaneous	577	32	1	В	40	S	A		
delivery. Sepsis.	by own were no ruptured as a cas looked deformi obtained was pre No abr morphis showing the pat the pat the pue had pre was sca disconti day pre intraver uleron	doctor. I toxemic set on $16/2/2$ se of delayed well nour ty of limbs defore desenting, was normality a, gr. $\frac{1}{4}$ , we sent was defined was interest was defined and tent was defined. Stantosil (20 nous gluco (14 tablets)	history—nothing significant. Ante-natal care was undertal doctor. Health had been good throughout pregnancy. The toxæmic symptoms. Pains began on 15/2/40 and membrated on 16/2/40. Patient was admitted on 17/2/40 at 12.30 period delayed labour. On admission patient had good colour a well nourished. No anæmia, cyanosis, jaundice, cedema y of limbs was noted. T. 99° F., P. 120, R. 20. Urine was a before delivery. Uterus full-time size and the vertex, when the sign in the pelvis. The pelvic measurements were normality was detected in the other systems. On admissing gr. \frac{1}{4}, was given. Ten hours after admission the head of but the cervix was only \frac{2}{3} dilated. One and a half hours laborate was much better; T. 97° F., P. 80. On the second day perium the patient had a rigor and was confused mentally. So the side of the side of the second day and temperature rose to 104° F., P. 140. The prontosil stand. Staphlycoccus grown from cervical swab. On the fount of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side of the side o						
Late vomiting. Septic endometritis.	Hæmat during had ha had vo weeks, P. 108, though was sl becomi P. 140.	ls history— uria 11 y pregnancy d ante-nate miting since even with r R. 20. Pa no conjunct ight jaund ng septic. On 11/5 ne given.	-scarlet frears ago.; full-time al care at the early proposed of tient was extival icterice, pulse On 9/5/4/40 at 10	Obstetrice instrument Partick We regnancy—pocasional delyspræice. The torising, and and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and particularly and par	renal compared history—I tal delivery elfare Centuractically of the conference was a formula was made general of F., P. 124. The could be the could be a second of the could be a second of the could be a second of the could be a second of the could be a second of the could be a second of the could be a second of the could be a second of the could be a second of the could be a second of the could be a second of the could of the could of the could be a second of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could of the could	of live chile, six visits ontinuous in admission slight tint noist. On a condition property on 10/5/40 was given; not swallo	hen young. e vomiting d. Patient s. She had n last three T. 98·2° F., of jaundice, 8/5/40 there oor, mouth o T. 102° F., at 12 noon ow. Patient hypostatic		
General debility. Septic endometritis. Septicæmia.	Obstet full-tin	ric history ne spontane	-1932, n	ormal full- ery, patient	had been we	ancy; 1934 transferred Il until 7th	A 5, ill-health, to Belvidere a month and or one week,		

Nature of Case.	Reg. No.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.
	1						

but no visual upset. On admission T. 97° F., P. 86, R. 20. Patient was pale and tired looking and the feet and ankles were much swollen. Surgical induction of labour was carried out on 11/7/40 and labour commenced on 13/7/40 at 11 a.m., and the child was born at 1 p.m. spontaneously. Patient looked very pale and exhausted after delivery. On 15/7/40 300 c.cs. sucrose were given intravenously to reduce ædema. On 16/7/40 some improvement was noted, but on 17/7/40 condition deteriorated. On 18/7/40 there was a sharp elevation of temperature and 300 c.cs. intravenous sucrose were given. On 18/7/40, at 2.30 p.m., 800 c.cs. citrated blood were given intravenously, but at 5.30 p.m. patient suddenly collapsed and died. P.M. exam.—Septic endometritis; septicæmia.

Puerperal sepsis. Secondary post-partum hæmorrhage. Death under anæsthesia. 4040 | 40 | 1 | B | 42 | S | A

Previous history—nothing of note. Health had been good except for swelling of right leg in last month. On admission T. 98° F., P. 96, R. 20. There was ædema of ankles. Labour commenced three days before admission on 2/12/40, and there was a foul vaginal discharge. The cervix was fully dilated on 6/12/40 and patient was becoming distressed. Mid-forceps delivery was effected on 6/12/40, with vaginal tear which was repaired. The lochia was very foul on 7/12/40. The temperature rose to 101.8° F. on 8/12/40 and remained intermittent thereafter. Cervical swabs showed B. coli infection only. Proseptasine was given four-hourly from 9/12/40. Condition improved, but on evening of 15/12/40 patient took a bleeding and collapsed. Morphia, gr. \(\frac{1}{4}\), and atropine, gr. 1/100, were given and theatre prepared. Intravenous glucose saline was started as anæsthetic was given, but patient collapsed and died despite intravenous coramine and artificial respiration. P.M. exam.—Puerperal sepsis; signs of hæmorrhage; sloughs in the vagina.

Second stage delay.
Forceps.
Sepsis.
General peritonitis.

497 | 41 | 1 | B | 41 | S | A

Patient had had ante-natal care by her own doctor. No complaints during pregnancy. She went into labour on 8/2/40 at 5 a.m. Sickness developed on 10/2/40 and hiccough had been persistent from then. On admission T. 97.6° F., P. 120, R. 20. Acetone present in breath. No jaundice, cyanosis, ædema or deformity of limbs was noted. The uterus was full-time size and the vertex was presenting. The fætal heart-rate was 130 per minute. The pelvic measurements were normal. Therewas no disproportion and the head was engaged. No abnormality was detected in the other systems. The B.P. was 160/105 and there was no albumen in the urine. Omnopon, gr.  $\frac{1}{3}$ , was given ten hours after admission. Two hours later, after one pint of 20 per cent. glucose had been given intravenously, the patient was examined under an anæsthetic and the cervix was found to be  $\frac{3}{4}$  dilated (1.5 a.m. on 12/2/40). At 12.40 p.m. the cervix was fully dilated and a low forceps delivery was performed under gas, oxygen and vinesthene anæsthesia. The child was covered with meconium and was difficult to resuscitate. The placenta was left in situ. The patient's condition was very poor, the pulse was very rapid (150 per minute) and of very poor volume. An intravenous

Nature of Case.	Reg.	Age.	Parity.	Category.	Maturity.	Pyrexia or Sepsis.	Child.	
	glucose transfus: placenta placenta with ime	ion of 800 was expression was foul perceptible and the ten	c.cs. was essed under smelling. pulse. C mperature	s given, an er gas, oxy Patient's on 14/2/40 rose to 10	d at 9.30 gen and et condition signs of ge 1° F. The	en. At 7 p.m. a by p.m. on 13/2/40 ether anæsthesia. In was still very prepared peritonitis we patient died at 1 mg into broad ligam		
Localised peritonitis. Parametritis. Old tear of cervix.	Previous delivery and ther admission though 16/10/4 was less vagina pashe died	s history— . Patient leafter felt on T. 100·2° the abdome of she still pronounce backed with	-nothing had been deserved partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial severe partial s	of note. Odelivered or in in epigas, R. 24. Gestended and er abdomins 9/10/40 poe. On 20/I. exam.—	40   Obstetric hatside on 14   strium and eneral appear   tympanitical pain. Obsterior colp   10/40 condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condication of the condic	istory—one /10/40 by l down right trance was s c, but not n 17/10/40 otomy was ition much	ow forceps side. On atisfactory rigid. On the pain done and worse and	
Pulmonary tuberculosis. Not pregnant.	pregnan and she hospital tubercul	t. Examin died in the P.M. exa osis, bronc	ed with plation, ho Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation with the Isolation wi	 hthisis as sl wever, reve ward while a loid change onia of the	he was thousealed no examiting transiting transiting transiting and helives and helives and purules	ght to be to denote of the consideration of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of the constant of th	pregnancy uberculosis nd spleen; ceration of	

## STILL-BIRTHS AND NEO-NATAL DEATHS.

#### 1. Still-births.

The total number of still-births in the indoor cases during the year was 356. Since the total number of viable children born was 3,101, this gives an incidence of still-births of 11.5 per cent.

Cause of Still-birth	No. of Cases.			
Hypertensive toxæmia		_	-	74
Mixed accidental hæmorrhage -	_	_		$4\overline{4}$
Fœtal deformities	•	_	_	$\frac{1}{42}$
The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon		_	-	$\overline{26}$
Intra-uterine death. Cause unknown Prolapsed cord	-	-	-	23
Malpresentation	-	-	-	20
Placenta pravia	•	-	-	19
External accidental hæmorrhage	-	-	-	17
External accidental hæmorrhage Second stage delay. Forceps Intra uterine death in labour Eclampsia	-	-	-	15
Intra uterine death in labour -	-	-	-	12
Eclampsia	-	-	-	11
Breech, manual	-	-	-	10
Breech, spontaneous (1 contracted pel	lvis)	-	-	8
C.P. Forceps	-	-	-	8
O.P. Forceps (1 F.F.O.)	•	-	-	6
Cæsarean section, contracted pelvis -	-	-	-	4
Late vomiting	•	-	-	4
Perforation and traction (2 F.F.O.) -	•	-	-	3
F.F.O. Forceps	•	-	-	3
F.F.O. Forceps F.F.O. Spontaneous	•	-	-	2
Breech, external version (spontaneous)	)	-	-	$\sim$ $2$
$\operatorname{Syphilis}$	-	-	-	1
Ruptured uterus	-	-	-	1
Impacted shoulders (vertex presentati	on)	-	-	1
			.,	

#### 2. Neo-natal Deaths.

The total number of neo-natal deaths was 232. The number of live-born children being 2,745, this gives an incidence of neo-natal death of 8.4 per cent. There were 2 infants born outside where the mother was not admitted. They are not included in the above totals, but are in the table given below, correlating cause of death and maternal condition.

Cause of Death.	Maternal Condition No.	of Cases.
Prematurity	Premature labour	25
and	Hypertensive toxæmia	18
atelectasis.	Accidental hæmorrhage	18
(tocioobasis:	Placenta prævia	14
	Hydramnios	5
	Cardiac	8
	Multiple pregnancy	11
	Eclampsia	ì
	Prolapsed cord	1
	Others	14
	Others	1 <del>1</del>
	Total	115
Pneumonia.	Hypertensive toxæmia	9
	Accidental hæmorrhage (1 conc.)	7
	Healthy, spontaneous	9
	Second stage delay, forceps	3
	Contracted pelvis	$\begin{array}{c} 3 \\ 2 \\ 2 \\ 2 \end{array}$
	Placenta prævia	$\frac{\overline{2}}{2}$
	Eclampsia	$\frac{2}{2}$
	Cardiae	ĩ
	Tuberculosis	ī
	Pneumonia	i
	Others	5
	Total	42
Cerebral	Hypertensive toxæmia	10
hæmorrhage.	Accidental hæmorrhage	9
<u> </u>	Contracted pelvis	5
	Eclampsia	2
	O.P. Forceps	2
	Second stage delay, forceps	1
	Manual brecch (1 forceps, A.C. head) -	2
	Delayed labour, spontaneous	$\frac{2}{2}$
	Brow	1
	Others	6
	Total	40
Deformities.	Hypertensive toxæmia	2
	Accidental hæmorrhage	1
	Contracted pelvis	1
	Hydramnios	1
	Twins	1
	Healthy, spontaneous	1
	Total	7

Cause of Death	Maternal Co	ndition.				No. of Ca	ses.
Cerebral birth injury.	Contracted pelvis, force Manual breech F.F.O	-	-	-	-	$\begin{bmatrix} 2\\2\\1 \end{bmatrix}$	
	Hypertensive toxæmia Spontaneous breech -	-	-	-	-	1	
	Total	-		-	-		7
Congenital heart disease.	Various complications	-	-	-	-	4	
	Total	-	-	-	-		4
Meningitis.	Contracted pelvis, spon C.P. Forceps	-	.s -	-	-	$\begin{vmatrix} 2\\1 \end{vmatrix}$	
	Hypertensive toxæmia	-	-	-	-	1	
	Total		-	-	-		4
Hæmorrhagic disease of	Healthy, spontaneous Cardiac, forceps -	-	-	-	-	$\frac{2}{1}$	
new-born.	Hypertensive toxæmia,	forcep	s	-	-	i	
	Total	-	-	-	-		4
Abscess of lung.	Eclampsia Late vomiting, jaundic	- e -	-	-	-	1 1	
•	Total	_	-	-	-		2
Empyema.	L.O.P. Forceps - Accidental hæmorrhage	-	<u>.</u>	-	-	1 1	,
	Total	<u>.</u>	-		_		$\frac{1}{2}$
Atresia of bowel.	Premature labour -	_	_	_	_	$\frac{1}{2}$	
	Total	-	-	•			2
Pyonephrosis.	Hypertensive toxæmia Breech, spontaneous	-	-	-	•	1 1	
	Total	-	•	<b>&amp;</b>	_		2
Thrombo phlebitis of	Late vomiting	-		•	-	1	
umbilical veins.	Total	-	-	-	-		1
Jaundice.	C.P. Cæsarean section	_	-	-	-	1	
	$\operatorname{Total}$	-		-			1
Enteritis.	Hypertensive toxæmia	,	-	-	-	1	
	$\operatorname{Total}$						1

^{* 69} infants died within 24 hours of delivery.

#### PUERPERAL FEVER AND PUERPERAL PYREXIA.

The following tables have been prepared from the records of hospital cases who developed puerperal fever or puerperal pyrexia while in the wards.

The standard used was that of the Department of Health which defines puerperal pyrexia as any febrile condition (other than a condition which is required to be notified as puerperal fever) occurring in a woman within 21 days after child-birth or miscarriage in which a temperature of 100·4° F. or more has been sustained during a period of 24 hours or has recurred during that period. In order to obtain more accurate figures, elevations of temperature occurring immediately after delivery, miscarriage or abortion are included and all temperatures have been taken from four-hourly records.

The puerperal sepsis table gives the distribution of cases in the two categories and indicates the mode of delivery in the cases in which sepsis was found.

Details of the cases who died of puerperal sepsis in the hospital are to be found in the section on maternal deaths.

There were 27 cases of puerperal sepsis transferred to Isolation Hospitals. A table has been made showing mode of delivery and the ultimate result in these cases.

## Puerperal Sepsis and Pyrexia.

	Sepsi	s.	Pyr	m / 1		
Mode of Delivery.	Cat. A.	Cat. B.	Cat. A.	Cat. B.	Total.	
Spontaneous Forceps Cæsarean section Craniotomy Abortion Manual delivery Abdominal hysterectomy Abdominal hysterotomy B.B.O Perforation and traction Perforation and forceps		2 1 2 - - - 3 -	18 8  9 3  5 3 1	20 11 9 — 1 1 1 1	37 26 15 1 2 6 — 4 —	77 46 26 1 11 10 1 1 13 3 1
Totals -	-	8	47	44	91	190

# Cases of Sepsis Transferred to Isolation Hospitals.

		· Res	ult.	m 1
Nature of Case.		Recovered.	Died.	Total.
Spontaneous		$ \begin{array}{c c} 11 \\ 3 \\ -5 \\ 2 \\ 2 \\ 2 \end{array} $	- - 1 - 1	$ \begin{array}{c c} 11 \\ 3 \\ \hline 6 \\ 2 \\ 3 \\ 2 \end{array} $
Totals	-	25	2	27

	*S
	\
	.B.
.A.	٠.٧
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Co	
rexia.	1
Py	

		1
.lstoT	20 11 19 1	44
Endo- carditis.		
Meningitis.		
.eiilitienoT		
binoW sisqeS		1
Pyæmic abscess.		
Phlebitia.	1	1
Oral Sepsis.		
Pulmonary T.B.	"	-
Miliary T.B.	-	
Respiratory.	e	4
.visniiU	4169	$\infty$
Mastitis.	1   1   1   3 0	10
Pyrexia nwondun).	994     11	18
		•
	 	•
	1 1 1 1 1 1	
ery.	1 1 1 1 1 1	1
Mode of Delivery.		Totals
ode of	Spontaneous Cæsarean section	
Mc	s - ction hyst very hyst	
	neous n se inal deli	
	Spontaneous Forceps Cæsarean section Abdominal hyster Manual delivery B.B.O Abdominal hyster	
	Sport For Case Ab Ma B.J Ab	

Pyrexia. Category B.

	37	0	97	15	_	07	ဗ		1	4	91	
	_	۲		1						1	-	
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			1		-	1			1			
	-	4	1	1	1	1	1	1				
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		•	ı	ı								
		•							•	1		
		•	•	٠	,	•	ı	tomy	ctomy	•	Totals -	
		•	1	ion	•	•	ry -	stero	stere	1		
		Spontaneous	Forceps -	Cæsarean section	Craniotomy	Abortion .	Manual delive	Abdominal hysterotomy	Abdominal hy	B.B.O		

ABORTIONS, MISCARRIAGES AND MISSED ABORTIONS.

There were 429 cases admitted on account of incomplete, threatened or missed abortion during the year. Of these, 60 were in Category A and 369 were in Category B.

There were 4 cases of hydatidiform mole in the hospital during the year.

## APPENDIX.

This Appendix gives a résumé of the work of the hospital in the past five years.

## INDOOR CASES.

## MATERNAL DEATHS.

Year	Admissions	Abnormals	Percentage of Abnormals	Year	Number	Percentage of Admissions	Live
1936	4,717	3,346	70·9	1936	66	1·4	$\begin{array}{c} 22 \cdot 3 \\ 21 \cdot 2 \\ 22 \cdot 7 \\ 21 \cdot 8 \\ 23 \cdot 8 \end{array}$
1937	4,724	3,578	75·7	1937	62	1·3	
1938	4,816	3,611	74·2	1938	67	1·4	
1939	4,502	3,498	77·7	1939	59	1·3	
1940	4,354	3,367	77·3	1940	65	1·5	

#### STILL-BIRTHS.

#### NEO-NATAL DEATHS.

Year	Total Number Still- births	Total Viable Children	Still-birth Rate Per cent.	Total Number Deaths	Live Born Children	Death Rate Per cent.	Deaths under 24 Hours
1936 1937 1938 1939 1940	436 434 436 421 356	3,389 3,365 3,387 3,236 3,101	$\begin{array}{c} 12.8 \\ 12.9 \\ 12.9 \\ 13.0 \\ 11.5 \end{array}$	258 318 148 215 232	2,953 2,931 2,951 2,815 2,745	$8.7 \\ 10.8 \\ 5.0 \\ 7.6 \\ 8.4$	106 73 54 78 69

## OUTDOOR SERVICE.

Year	Patients Attended	Infants Born	Infants Born Alive	Percentage Infants Born Alive	Fatal Cases
1936	4,724	4,543	4,457	98.1 $98.5$ $98.5$ $98.6$ $97.7$	1
1937	4,474	4,325	4,260		0
1938	4,544	4,386	4,302		1
1939	4,322	4,219	4,152		1
1940	4,174	4,138	4,044		6

SEPSIS AND PYREXIA.

SEPSIS		Pyr	Total		
Year	Cat. A	Cat. B	Cat. A	Cat. B	Total
1936 1937 1938 1939 1940	22 6 11 14 8	51 42 11 36 47	51 71 95 73 44	87 124 132 104 91	211 243 249 227 190

Cases transferred to Isolation Hospitals and cases transferred to Municipal Hospitals by overflow arrangement:—

Year	CASES TO	Overflow		
Lear	Recovered	Died	Total	Overnow
1936 1937 1938 1939 1940	$egin{array}{c} 14 \\ 11 \\ 26 \\ 25 \\ 25 \\ \end{array}$	6 8 3 2 2	20 19 29 27 27	651 563 343 261 301

TEACHING.

The decrease in numbers of nurses enrolled in 1939 and 1940 is due to the new C.M.B. rules coming into force.

Year	Students Enrolled	Nurses Enrolled
1936	225	271
1937	263	270
1938	291	278
1939	263	228
1940	293	144



